

CHEMIST & DRUGGIST

OVER THE
COUNTER INSIDE

The newsweekly for pharmacy

November 30, 1991

Tixylix

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- See the Intercare feature inside for important news.
- Everyone who enters the "Dictionary of Terms" Competition gets a prize with Compact Disc players for the winners.

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Tixylix

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FOR 1 TO 10 YEAR OLDS

Tixylix

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FOR 1 TO 10 YEAR OLDS

Tixylix

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Soothes coughs

FOR 1 TO 10 YEAR OLDS

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Inhalant

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INTERCARE

A SANDOZ COMPANY

Tixylix

Boots face complaint on Times advert

Pharmacy pays £300,000 for dispensing error

Jury dismissed in Gossain trial

Business in focus: external factors blamed

Counting the costs of EPOS

A C&D seminar: investigating hair colourants

AAH in MMC straitjacket after referral

Numark signs up Sangers (NI)



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Boots escape Statutory Committee censure over MDS advert in *The Times* 898
Decision on case against pharmacy superintendent held until next month

Man given diabetes drug in error receives £300,000 damages 899
High Court confirms award against London-based Ashapura Enterprises

Jury dismissed in GP and pharmacist wife NHS fraud trial 900
Reporting restrictions not lifted as case to be relisted in the New Year

GP and pharmacist acquitted of creating bogus scripts 900
Both back in Court next month on deception charges

Looking at hair and hair colourants 909
A C&D Bristol-Myers pharmacy training seminar

Counting the costs of EPoS 913
Improvements still begin with the pharmacist, argues Eric Jensen

Trading in a declining shopping precinct... 916
But there are reasons to be cheerful, says John Kerry

AAH face MMC referral over Medicopharma assets 919
Restrictions placed on attempts to bring in new business

Sangers (NI) take up Numark franchise 920
Full range of services to be available possibly from January

REGULARS

Topical reflections	901
Counterpoints	902
Prescriptions specialities	908
Letters	918
Coming events	920
Classified advertisements	921
Business Link	923
About People	924

Comment

It is entirely appropriate that in its 150th anniversary year the Royal Pharmaceutical Society should take steps to revise the Code of Ethics, so that the professional code governing the practice of pharmacy should be as modern as the profession is mature. The revised Code, comprising the "principles" of the code itself, the new "obligations", and the refreshed "guidance" section, is open to comment by the membership, but not for much longer — the deadline is December 30.

Members should welcome Council's efforts to distinguish clearly between the mandatory and the advisory, always being mindful that where they exercise their professional judgment, they do so in the knowledge that they can be called to account for any dubious decisions not held to have been taken in the best interest of their patients or their profession.

The new section of the Code on professional advertising was adopted in May. While welcoming the fresh scope given to the proper presentation to the public of available professional services, pharmacists may be concerned at the length of time necessary to complete the referral processes when complaints about "creative" advertisement are made to the Ethics Committee. The tendency may encourage some advertisers to force the pace and to push back the frontiers of what is permissible. Meanwhile, damage may be suffered by

neighbouring practices and precedents set almost by default while decisions are taken, if the advert in question is found to have exceeded the bounds of what is acceptable.

The Code also endeavours to put flesh on the standards of practice required, and to define the physical characteristics of premises and the state in which they should be maintained. No-one will be sorry, for instance, that broom-cupboard pharmacies will be out, but does the requirement for a minimum 15sq m dispensary mean new smaller premises will not be registered?

The Code also spells out unambiguously how GSL medicines can be displayed. It is important that pharmacists site medicines so that it is clear they come within their advisory ambit, even to the extent of notices near GSLs, saying that additional advice on these and Pharmacy medicines is available from the pharmacist.

With advice in mind, it is also important that those people effecting prescription delivery services are either the pharmacist, or a qualified dispensing assistant. If the chronically ill are, on occasion, to be precluded from direct contact with the doctor, then it is important that the person responsible for implementing their drug therapy has the knowledge to do so.

Boots cleared after complaint over MDS advert in *Times*

A "scaremongering" promotion by Boots the Chemists in *The Times* newspaper last year brought the company before the Pharmaceutical Society's Statutory Committee last Wednesday, following a complaint from a Liverpool pharmacist.

Mr H.M.J. Kirk of 104 Derby Lane, Liverpool, alleged that an advertisement in *The Times* on May 10, 1990, headed "A life or death decision", seeking to promote the company's monitored dosage system, suggested that the present prescribing, dispensing and administration of medicines was unsatisfactory and potentially harmful. The advert was "offensive, scaremongering and denigratory", alleging that "lives were being put at risk by non-monitored dosage systems". It was alleged that the advert infringed the Society's Code of Ethics. Mr Kirk said that the advert was "an obscenity to all carers and pharmacists and a thoroughly disgraceful affair."

On May 10, 1990, *The Times* had carried a feature on the care of the elderly, Michael Hosford-

Tanner said, presenting the case to the Statutory Committee. Within this feature was the Boots' advert.

The Code of Ethics relating to advertising states that an advertisement "must not be misleading and have no criticism of the services of other pharmacists and have no claim of superiority," Mr Hosford-Tanner said.

In a letter to the Council Colin Baldwin, now a director of Boots and formerly pharmacy superintendent, stated that he did not agree the advert conflicted with the Code of Ethics. He said that Boots would not have placed the advert if they knew the context in which it was to be published, as it had been drafted to be targeted at professional carers. The advert has not been used since.

Committee chairman Gary Flather QC, said, "There are so many good things about this system but this advert seems to highlight the system in one particular way. This frightens people into using it. The advert strikes home that confusion might cause your death. Boots did not need to resort to this

sort of approach."

Mr Baldwin said he recognised the advertisement had attracted controversy. "The *Times* advert was placed at very short notice and was drafted as a matter of urgency. It was not practicable to get approval from the Society," he said. "There was no doubt in my mind that it did not conflict with the Code of Ethics."

Mr Baldwin continued: "I believed that the advert would be targeted to professional carers only. The system is only provided through our pharmacies to residential homes. I believed that the advert would be in a separate supplement but I found the advert was in a feature about the care of the elderly in an integral part of the paper. It was only on the day of the publication that I saw the layout."

The advert gave a free phone number. Of the 23 inquiries received, nine were from professional carers, said Mr Baldwin. The only complaints were from pharmacists.

Mr Baldwin said he stood by a statement made in the advert that: "Every day elderly lives are put at risk by the very medicines they are prescribed." He admitted that there were no published statistics to support such a statement and agreed with the policy that one should not frighten someone into using a medicine or such a system.

Mr Flather told the hearing the Committee would make no order against Boots, but he said: "As far as the case against Mr Baldwin we need more time to consider it." The Committee will give judgment in December.

Winter cold or allergy?

Pharmacists have the same difficulties as doctors in distinguishing between colds and allergic rhinitis in Winter, a survey has found. But most felt they could offer appropriate treatment without referring the patient to a GP.

Only 21 per cent found the distinction between the two conditions easy to make, although 69 per cent said this would depend on the patient and the information given. Pharmacists found that one-tenth or less of cold symptoms were related to an allergic response. Perennial rhinitis is less common than hayfever which occurs in 10 per cent of the population, so pharmacists' perception corresponded with its incidence.

A strong pointer to perennial rhinitis was persistent cold symptoms; other major clues were that patients suffered from hayfever or other allergies. Three-quarters of the pharmacists tried to establish if there were any problems with dust or animals in the patient's home.

Only 13 per cent of pharmacists thought it necessary to refer patients to their GP and 78 per cent claimed they would advise on allergen avoidance at the same time as recommending an antihistamine.

Most pharmacists (70 per cent) would recommend a newer, non-sedating antihistamine but older preparations were thought to be of value if a good night's sleep was desirable. The top three antihistamines were Triludan, Piriton and Hismanal.

Over two-thirds of customers frequently asked for a medication that did not make them drowsy. However, half did not appear to know what antihistamines were.

Sixty per cent of pharmacists believed their choice of product would not be influenced by what local doctors were prescribing. The survey was carried out on behalf of Merrell Dow.

Gold Spot lands driver in hot spot

A woman has been cleared of a drink driving charge after it was demonstrated that a breath freshener spray pushed up the breathalyser reading.

Carole McKenzie of Wakehams Hill, Pinner, had her conviction and one year's driving ban overturned when a demonstration showed that Gold Spot spray sent the reading on the intoximeter over the legal limit. Mrs McKenzie told the court that she had used the spray because she had just eaten a curry and did not want her breath to smell.

The Daily Mail, who reported the case, also put the spray to the test (November 23). Reporter Pravina Patel drank a couple of lagers which gave her an intoximeter reading of between 33 and 35 — under the legal limit of 35mcg of alcohol per 100ml of breath.

However, two squirts of Gold Spot pushed the reading to 422 — 12 times the legal limit. Some nine minutes later, the effects had virtually worn off with a reading of 39 — a little over the limit. One hour later the effect of the spray had disappeared.

Euan Venters, marketing director at Sara Lee Household and Personal Care, manufacturers of Gold Spot, commented: "Gold Spot

does produce misleading results in intoximeter testing but only when sprayed minutes before a test. It is believed that an average dose will deliver approximately 0.065ml of alcohol per use. The effect of this tiny amount is only discernable for a few minutes and does not affect results of blood or urine tests."



FHSAs should look at RPSGB's new Code of Ethics

Family health services authorities looking at quality standards in primary healthcare would be well advised to look at the Royal Pharmaceutical Society's new Code of Ethics and Guide to Good Professional Practice, and possibly adopt it as the norm in their particular area.

This was the message from the Society's vice-president, David Allen, at the Teeside Branch's sesquicentenary banquet on November 23.

"Inspection and enforcement through the Royal Society is, I believe, the way forward to progress this issue," he continued. On the question of quality care, he said the Society is "actively discussing the whole subject of pharmaceutical audit and will be reporting in early 1992".

Mr Allen referred to a *Which?* consumer report due to be published next month which, he hoped, would show the responsible,

professional role of pharmacists in the High Street in advising patients. However, he stressed that if pharmacists are to perform this role with more credibility it is essential that more Prescription Only Medicines are transferred to the Pharmacy list.

Denmark, and more recently New Zealand, have released a number of products from prescription control, he said. "The not inconsiderable savings to the Health Service both in pure costs and GP time are there to be gained."

Turning to hospital pharmacy, Mr Allen said that clinical pharmacy is now a reality in many hospitals. "With the mad rush to change to Trust status I appeal to general managers not to ignore this valuable asset to the running of your Trust," he said. "Pharmacists have a valuable role to play both in practical and management terms in any future hospital service."



Cutting the cake at the Teeside Branch's sesquicentenary banquet are David Allen (left) vice-president of the Royal Pharmaceutical Society and Councillor Ted Wood, chairman of Cleveland County Council, watched by Margaret Pear, chairman of the Teeside Branch. Selling pieces of the cake raised £81 for Children in Need, with the evening's raffle bringing the total to £200

Pharmacies under threat by doctors' rural applications

Pharmacies in the villages of Bellingham in Northumberland and Braunton in Devon could face closure if applications by local doctors to dispense for their rural patients are given the go ahead.

Chris Carpenter, owner of a pharmacy in Braunton, told *C&D* that the application, by doctors at the Caen Health Centre, could have a "quite horrendous" effect on his business. He estimates that he stands to lose up to 20,000 items per annum. The question of rurality in the area is due to be discussed by Devon Family Health Services

Authority next month, he said.

Braunton is reputed to be the largest village in England, says Mr Carpenter, with around 10,000 people living in the area. The application would result in around 2,900 people being transferred to the GPs' dispensing list. The area has a large number of temporary residents in the Summer and a nearby air base.

To gain the support of his rural patients, Mr Carpenter started a petition and, he says, about 99.9 per cent of patients are behind him. "I was extremely gratified by the enormous public support towards me and the pharmacy". Mr Carpenter adds it is "a national scandal" that patients are not being told that doctor dispensing can mean that unqualified people dispense medicines.

There is a second pharmacy in Braunton, which was a branch of Cross & Herbert, now owned by Lloyd's Chemists.

In Bellingham, Bill Holden of Holden's Pharmacy, says the move by Drs Mungall and Blades could mean that about two thirds of the pharmacy's prescriptions will be lost. "It would shut us out," he says, describing the effect as "unsustainable". Many people in the village are furious about the prospect of losing their chemist, he says, adding that the doctors are maintaining that the pharmacy will remain viable.

Mr Holden says he is considering introducing a delivery scheme for rural patients and possibly extending the shop's ag and vet services. Northumberland FHSAs expects the application to be considered in January.

£300,000 paid in damages after dispensing error

A man who went into a coma and suffered permanent brain damage after he was given the wrong medication at a pharmacy received £300,000 compensation at the High Court in London on Monday.

David Greene, 42, was a mild schizophrenic and was prescribed chlorpromazine by his GP, said his QC Robin Stewart. But when he went to a pharmacy owned by Ashapura Enterprises Ltd at Caledonian Road, Islington, North London in September 1986, he was given a bottle for someone else with the same surname. It contained a different drug, chlorpropamide, used to treat diabetics to lower their blood glucose.

Mr Greene, formerly of Brooksby Street, Islington, used the tablets and some days later he was found collapsed by his former common law wife, Erica Brown. He

was in a deep hypoglycaemic coma. Liability was not in issue, Mr Justice Garland was told.

Mr Greene, a musician, is now living near his family in the Republic of Ireland and is an in-patient at the Royal Hospital at Donegal. He has severe brain damage, and is epileptic. He is virtually wheelchair-bound, but can walk a few steps with helpers holding him on either side. He cannot talk except to say "yes" or "no". But he recognises his common law wife and son.

Mr Greene had sued Ashapura Enterprises Ltd of Seven Sisters Road, Tottenham, North London, through Miss Brown. The money will be invested on his behalf to cover his hospital care.

Damages and costs for Ashapura Enterprises are being met by the Chemists Defence Association.

Facing up to demand

The time has come to act on the question of how to cope with unlimited demand for health with limited NHS resources, a PAGB seminar heard on Wednesday.

Government has already introduced limits on prescribing and more far-reaching NHS reforms. The effect on general practice, according to Dorothy Knightley of IMS, has been to make GPs more cost conscious in prescribing. Generic prescribing has increased from 33 per cent in 1987 to over 40 per cent in 1991 and is forecast to reach 60 per cent by the end of the decade. Numbers of GP consultations, however, have not gone down.

John Ball, president of PAGB, called for Government, pharmacists and doctors to work together with industry in helping consumers to have the right information on medicines.

Focus on primary services

The NHS needs to focus more clearly on primary healthcare services provided by doctors, nurses, dentists, community pharmacists and opticians, says the National Association of Health Authorities and Trusts (NAHAT). "The secondary (hospital) services are there to back them up when needed."

NAHAT's recommendation comes in response to three Government consultation papers on

future priorities and the integration of primary and secondary care.

The Association also calls for a flexible local approach and the eventual merger of district health authorities and family health services authorities.

NAHAT also recommends wider discretion for FHSAs in respect of GP contracts and a transfer of responsibilities for GP fund-holding from regional health authorities to FHSAs.

Gossain NHS fraud trial halted

The trial of a doctor and his pharmacist wife accused of defrauding the NHS (C&D November 16, p826) was halted at Isleworth Crown Court on November 21.

Two weeks into the trial, which was expected to last six weeks, Judge Fabyan Evans told the jury: "This trial has got to come to an end for very good reasons." He stressed that the reasons, which are subject to reporting restrictions, had nothing to do with the jury.

Dr Jagdeep Gossain and his wife Shahi, of Jersey Road, Osterley, West London, deny two charges of obtaining £159,000 and £29,000 from Ealing, Hammersmith and Hounslow Family Practitioner Committee and four specimen charges of furnishing false information to the Prescription Pricing Bureau. Dr Gossain further denies four specimen charges of false accounting relating to individual prescriptions. The trial will be re-listed in the New Year.

Pharmacists reprimanded over unlicensed imports

Two pharmacists who put profits before patients by supplying cheap imported drugs were both reprimanded by the Pharmaceutical Society's Statutory Committee last week. They made £1,100 a month for 15 months by illegally importing drugs which had not been licensed by the Department of Health.

Sydney Lister, of The Avenue,

Hatch End, Pinner, was fined £750 for supplying imported medication and his partner Arthur Hampton, of Ledborough Lane, Beaconsfield, Bucks, was fined £300 for possessing improperly labelled medication at their pharmacy in Field End Road, Pinner, when they both pleaded guilty at Isleworth Crown Court in November last year.

The Committee accepted both men had unblemished records and no actual harm was done to any patient who was supplied with the imported drugs, and accepted no doctor made any complaints either. It was made clear that such behaviour would risk any pharmacist being struck off, but the Committee in this case reprimanded both men.

The Committee was told by Inspector Janet Edgington, who made a routine visit on February 16 last year, that she found a variety of drugs imported from Australia. She pointed this out to Mr Lister who said he knew the products were unlicensed but claimed: "There is nothing I would buy that I wouldn't give as medicine to my own family".

He told the Committee that "many colleagues were doing exactly the same thing". He admitted he received a warning in 1986 for the same offence. "We always endeavour to give out clearly labelled products to the public," said Mr Lister, explaining the unlabelled drugs discovered would not be supplied to patients in that condition. He even had the imported drugs tested, which turned out to be exactly the same standard of those available in the UK.

His partner, Mr Hampton, said: "It was certainly a very wrong thing to do. I should not have been involved in improperly labelling and illegally importing products in the first place."

"Why should a patient be put at risk in this way?" asked Statutory Committee chairman Gary Flather QC. He condemned the reckless imposition of risk on a patient for the purpose of commercial profit.

Zovirax for the pox

An Advisory Committee of the US Food and Drug Administration has recommended that Zovirax should be approved for use in the treatment of chickenpox in otherwise healthy children and adolescents aged two to 18 years. The Committee reviewed data which demonstrated that acyclovir is efficacious and well tolerated in this age group. Outside the US, submissions for chickenpox are under review or being submitted to regulatory agencies, say Wellcome.

Extra funds for FPA

The DoH is to provide an extra £200,000 to the Family Planning Association to help fund three new information initiatives. The "Growing up" project will provide information for parents, while a primary healthcare project will enable health professionals to improve their range and delivery of family planning services. Another project will provide information on family planning and sexual health for men and women at their place of work.

DOOP Services

A scheme for the safe disposal and destruction of old pharmaceuticals within community pharmacy is now available in the South West from Dorset-based DOOP Services. Pharmacists purchase a "DOOP container" (£8.50) and when it is full (it will hold up to 10kg), attach a dated, addressed prescription label. The sealed container is then returned to one of the wholesalers involved in the scheme. Contact Michael Reynolds, DOOP Services Ltd, Tel: 0425 274188.



The speakers at a recent C&D Bristol-Myers seminar on hair colourants. From left to right: Tim Perman, Clairol group product manager; Professor D.M. Lewis of the department of colour chemistry, Leeds University; and Bob Shepherd, consumer relations and technical manager, Bristol Myers. Extracts from the seminar appear on p909 this week

GP and pharmacist acquitted of bogus script fiddle

A general practitioner and a pharmacist accused of creating up to 600 bogus prescriptions a month for more than a year have been acquitted at Southwark Crown Court.

The trial of Dr Abdul Khalid and pharmacist Ketan Patel (C&D October 12, p606) was halted by Judge Robert Southan last Thursday (November 21). At the end of the prosecution's case, the judge accepted the defence's submission that it would be "unsafe" to leave the defendants in the jury's charge. He dismissed the

jury and formally entered verdicts of not guilty.

Dr Khalid of Grove Park, Wanstead, and Mr Patel of Cranleigh Drive, Ilford, denied 28 charges of procuring by deception, cash from Redbridge & Waltham Forest FPC between June 1988 and June 1989.

Despite the acquittal, the two defendants will appear at the same court on December 20 for "pleas and directions" in relation to 29 remaining charges of procuring the execution of valuable securities by deception.

D&TB on wounds

The latest *Drug and Therapeutics Bulletin* looks at wound cleansing solutions, antibacterials and debriding agents. Its conclusions are as follows:

- Wounds tend to heal themselves. They cannot and need not be made sterile but warmth and moisture encourage healing.
- Wounds that look clean should simply be irrigated with saline.
- If an antiseptic is needed, chlorhexidine is recommended. Chlorine-based antiseptic solutions do harm and should not be used.
- Topical antibiotics have no place

in wound management, except metronidazole in smelly wounds and silver sulphadiazine on burns.

● Dry, necrotic wounds require surgical debridement. Superficial or even thicker yellow slough can be removed by soaks with physiological saline. Chemical debriding agents or hydrocolloid dressings may be effective for dry slough.

● Almost anything put on a wound can cause allergic contact dermatitis. Patch testing to determine individual sensitivities can be important especially in the management of leg ulcers.

Manchester win award

The University of Manchester has won a National Training Award for its training programme designed to enhance the quality of advice given by community pharmacists.

The programme, now in its third year, was devised by the University in partnership with Boots. All second year pharmacy students spend eight weeks working alongside experienced pharmacists in Boots' branches throughout the UK, with the aim of increasing

knowledge of dispensary procedures and patient communication.

The structured programme has been judged a great success. A subsequent evaluation showed a 70 per cent increase in the knowledge base of the trainees along with an increase in their confidence, self-motivation and ability to work as a team. Manchester University was one of 82 winners in the national competition.

GPs shun new medicines

GPs are prescribing proportionately fewer "new" medicines, a fact that is likely to reduce the finance available for research into unconquered diseases, claims the Association of the British Pharmaceutical Industry.

The Association's latest report reveals that British GPs are sparing users of new medicines compared with doctors in other industrial countries. Recent data suggest that growing cost constraints on the NHS medicines bill is making doctors even more reluctant to prescribe the latest medicines.

A breakdown of the prescribing of new medicines (five years old or less) shows overall sales of innovative products fell from 11 per cent of the total market in 1980 to 3 per cent in 1989, recovering to 5 per cent last year. New compounds introduced during the 1980s are winning only half of the peak market share gained by products of a similar age in the 1970s, the report reveals.

"Pressure on the finances of the NHS cannot justify providing patients with older or less effective treatments," says the ABPI. "Stifling the use of new medicines in an attempt to limit spending also results in the suffocation of new funding for future research."

■ The ABPI will be meeting with the Committee on Safety of Medicines, the Royal College of General Practitioners and the British Medical Association early in the New Year to review the Association's guidelines for drug post marketing surveillance studies.

Eradication of rabies a possibility

The 1991 Innovation Award has gone to researchers at Rhône-Merieux (Rhône-Poulenc Group) for the development of Raboral, the first anti-rabies vaccine obtained using genetic recombination techniques. It is also the first genetically-engineered virus to be released simultaneously in Europe and the USA, and the manufacturers believe it offers the chance to eradicate the disease.

The liquid vaccine is contained in a sachet hidden in an attractive bait. When the animal bites into the bait the vaccine flows into its mouth and passes to the target cells in the immune system.

The baits will be dropped by plane or helicopter over territory inhabited by the red fox, the main carrier of rabies in Europe. Abroad the possibility of vaccinating stray dogs is being studied.

Riboral provides long-lasting protection and has been tested on over 40 wild and domestic animal species.

A touch of Autumn distemper

It's moan time in the dispensary: possibly a touch of the Autumn blues but I am at the sharp end and my temper doesn't improve with age! First relief that, at last, 5ml Propine drops are back after three months of loss on each "OP" script, but then Parke-Davis decided to strip pack Erymax capsules into 28's in boxes the same size as the original 100 bottle. Even I could not understand how this could be done until I investigated to find that in the middle of each strip was an extra large but empty blister! Specifically designed, I presume, to absorb the blistering tirade of hot air aimed at Parke-Davis if I ever gain the opportunity of talking to their packaging experts. At this rate 15sq m for the dispensary will soon be too small!

While on the subject of original packaging, why have Reckitt & Coleman decided to discontinue 300ml Gaviscon? All my scripts are either for 300ml or 500ml, and OTC 200ml is a reasonable size. I use all three sizes for different purposes but now the 300ml has gone I will have to fill those scripts from 500ml, so removing the manufacturer's original identification labelling — surely one of the reasons for original pack dispensing — and while the brick bats are flying, what about Asilone? I was informed by Crookes that Asilone suspension is now without preservative and is for dispensing only while Asilone gel has been renamed liquid and with heavy advertising is intended for counter sale. Tell that to our local GP! He has always prescribed Asilone as "liquid"

when the patients have received suspension. With the change of name I have been dispensing "suspension" as I have always done, but have now received a large bundle of scripts back from the Pricing Authority as "different from that prescribed". I have supplied what was intended but technically erred so I will have to ask the GP to rewrite the whole lot. What a farce and all because of volcanoes on television!

That's Allergan, Reckitts, Crookes and Parke-Davis. Who else? I know, Fisons! What a miracle of modern science sodium cromoglycate was or still could be if only I could obtain supplies. No Intal inhalers, no Intal Co Spincaps and now no Rynacrom 4 per cent sprays, that wondrous new formulation designed to replace the old 2 per cent which I faithfully returned according to instructions and which since I could have dispensed twice over. All I now need is the annual flu vaccine panic and Christmas will have really started!

Stick to it for a quick amendment

Crookes have certainly hit the headlines with their problems over warnings on Karvol but it seems strange that a manufacturer requires approval to vary its product licence before a warning is printed on the packaging of a medicine. Many years ago, when restrictions were imposed on the use of aspirin in children, information was changed almost overnight by the use of amendment slips which were used on existing packaging until new

packs could be introduced.

Whether or not Crookes are required to comply with their licence a similar simple discreet "advisory" slip could be printed for the amendment of existing packs which would allow the company to respond quickly to parallel the warnings printed generally in the BNF concerning the use of "strong aromatic decongestants".

Excising prejudice necessary for FHSA

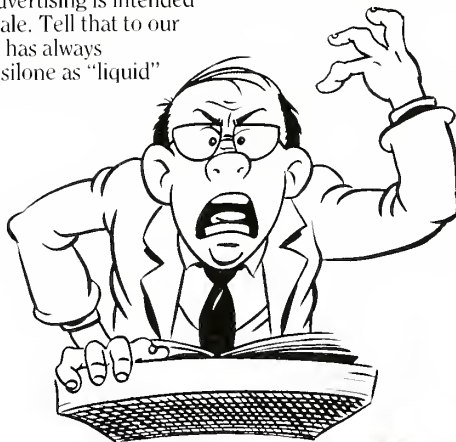
The events in Winterton on Humberside are taking on the appearance of a second Clochmerle but without, hopefully, the necessity of calling in the army to sought out the combatants.

It is clear that as Mr Barnett, superintendent pharmacist for Foster & Plumptre, suggests (C&D November 23) the application by a second company, Sedgemill Ltd, for a pharmaceutical contract, is a cynical attempt by the dispensing doctors' practice to maintain the status quo.

But nevertheless the application has to be considered by the Family Health Services Authority and a decision made that is in the best interests of their patients. Since the local practice owns and directs Sedgemill Ltd, any appeal on grounds of prejudice must now inevitably fail when the criteria of necessary or desirable should prevail.

It now appears, from the decision taken in Boots' favour at Canary Wharf, that applications need no longer be taken in strict chronological order, such that the possession of premises becomes a prime consideration. Sedgemill Ltd certainly has premises but the inside of a doctor's surgery cannot be the best site for the establishment of a genuinely independent community pharmacy. The FHSA is responsible for planning pharmaceutical services and if Foster & Plumptre can demonstrate they have access to premises in close proximity to the surgery this must be the preferred option.

Either way it appears that the patients of Winterton should soon be enjoying a genuine pharmaceutical service, but the FHSA must itself avoid any prejudice and in its decisions ensure that the service is sustainable and the best that can be achieved.



Topical REFLECTIONS

Counterpoints

Natural beauty steps with Botanicals



Aidee International are the sole UK distributors of a new range of toiletries, Botanicals, from an American firm, Smith & Vandiver.

Botanicals (being launched at the Spring Fair), are based on essential oils and herbs, and are cruelty-free and biodegradable, says the company.

The range comprises bath preparations, skincare products and hair products. The bath range is divided into six aromatic blends, each with a specific purpose including pear nectar to refresh and moisturise, pomegranate to moisturise and cleanse problem and normal skin, passion flower to soothe and relax, neroli oil for rejuvenation, and evening primrose oil for toning and boosting

circulation. Each comes as bath creme (2oz £2.59; 12.5oz £11.95), glycerine soap (2.5oz bar £1.95) and oil gems (six £3.95).

Skincare products comprise cleansing gel (6.5fl oz £11.50), floral tonic (12.5fl oz £9.25), moisture fluid (4fl oz £16.50) moisture replenisher (2fl oz jar £18.50), eye creme (1oz jar £13.95), hydrating spritzer (8oz bottle £11.50); and body scrub with honey and almonds (6oz tube £9.95; 12.5oz tub £14.95).

For men there is pre-shave wash (8fl oz £8.95), shaving lotion (4oz tube £5.95) and aftershave balm (8fl oz bottle £12.75).

There are shampoos for normal to dry hair (8fl oz £5.95) and normal to oily hair (8fl oz £5.95). The oil-

free conditioner is said to be suitable for all hair types (2fl oz £2.50; 8oz £6.95).

Also available are aromatherapy mood sprays for upholstery, linens or as a room spray. There is a choice of Rejuvenation spray, Tranquility spray, Sweet Dreams and Appetite Balancing spray. **Aidee International Ltd. Tel: 0626 833081.**

Braun support

Braun have brought out a consumer leaflet to explain the benefits of the Braun Oral B Plaque Remover electric toothbrush.

Other support includes a £1.4 million television campaign and Press advertising. A support package of information, including a video, is available to pharmacists. **Braun. Tel: 0932 785611.**

Couleurs Spring

Lentheric have introduced their new shades of colour cosmetics for Spring, called Couleurs.

The shades for Spring 1992 are said to be soft and translucent and are divided into warm and cool tones. The new Couleurs range includes lipstick, nail polish, eyeshadow, kohl, blusher, mascara and lip pencil. **Lentheric Morny Ltd. Tel: 0276 62181.**

Shelf appeal for Oxysept

Allergan have a seasonal six for five offer on their Oxysept handy pack. Since it is ideal for short holiday breaks, the handy pack offers considerable sales potential for the Christmas break, says the company.

Allergan have also introduced an educational merchandising unit to support their Oxysept system which, they claim, is the fastest growing contact lens care system in pharmacy.

The merchandising unit

comprises an A4 backboard with a leaflet dispenser that presents a simple guide to the Oxysept system. The unit presents Oxysept 1, Oxysept 2, LC-65 and Ultrazyme as a complete care system that will keep soft contact lenses "clean, clear and comfortable".

There is a competition for pharmacy assistants offering portable colour televisions. **Distributors Intercare Products Ltd. Tel: 0734 790345.**

Andrews Antacid gets TV blitz

A £2.5 million advertising campaign for Andrews Antacid, Sterling Health's new indigestion tablet, will be hitting television screens from December 11. The commercial will be seen by an estimated 86 per cent of adults.

The advert shows the man silhouetted on the pack coming alive to illustrate the product's benefits — it is the only digestive remedy on the market positioned to relieve heartburn, acid indigestion and trapped wind, say Sterling.

The first burst of the TV

campaign is timed to coincide with the festive season, appearing on ITV, Channel 4, TV-am and satellite. The advertising will also be complemented by promotional activity and a "comprehensive display package", say **Sterling Health. Tel: 0483 65599.**

Start the New Year with a holiday...

For the third year in succession, the Wellcome Foundation's Consumer Healthcare Division is offering community pharmacists countrywide the chance to win one of three Thomas Cook holidays to the destination of their choice, each worth £1,500.

To take part, pharmacies have to display Wellcome's new window display cards featuring their "Winter winners" — Sudafed, Calpol, Actifed and Drapolene. Wellcome representatives will check on pharmacies displaying the full range of showcards and enter them into the draw.

There are three chances to win with draws taking place on January 27, February 24 and March 16, 1992. In addition, 30 runners-up will each be given a Cross rolled gold pen set, worth £112. **Wellcome Foundation Ltd. Tel: 0270 583151.**

Herbal Glo range for thinning hair

A range of shampoos and conditioners containing a herbal formula which claims to help thinning hair has been launched in the UK.

Herbal Glo, already available in the US and Canada, was created by pharmacist Darryl Segal, who came across the herbs while on an African safari.

The range includes a scalp lotion, applied and left overnight, shampoos and conditioners.

Herbal Glo Hair and Skin Cosmetics are looking for retailers to stock the range. For details contact managing director Sultan Bhatia, **Herbal Glo. Tel: 081-395 3016.**

Put fun back into brushing!

Evolution 2 have brought out a range of children's fun toothbrushes. Latex characters fix onto the end of the brushes — there are ten to choose from, including a Red Indian and a duck. They retail at £2.50 each.

Point of sale material is available, including a dispenser which holds 60 toothbrushes.

Fun toothbrushes will be on show to the trade at the Spring Fair, Birmingham, February 2-6. **Evolution 2. Tel: 081-316 7886.**

ENERGY RESTORED

**LUCOZADE BOTTLES
BACK ON SALE
READY FOR WINTER!**

**SMITHKLINE BEECHAM WOULD LIKE TO THANK ALL
CUSTOMERS FOR THEIR ASSISTANCE AND SUPPORT**



THE NUMBER ONE RANGE OF ENERGY DRINKS

SB
SmithKline Beecham
Consumer Brands
Drinks U.K.

Kent add stylers with a golden touch

Kent have brought out a new range of styling brushes with gold handles. Each is heat-resistant and has a rubber grip to make styling easier.

The new brushes are: the LA25, a large vent brush with ball-tipped nylon quills and chunky handle (£4.25); LA20, a round bristle styler (£4.75); LA21 a round single strand brush with flexible quills (£4.25); LA22, a round double strand brush to create softer styles (£4.95); LA23, a large brush suitable for drying long and shoulder length hair (£8.25); and LA24, a handbag size mini-vent brush (£3.95).

G.B. Kent & Sons. Tel: 0442 233623.



Syndol campaign targets seasonal stress

Merrell Dow are launching a Press campaign to support their analgesic brand Syndol, using the theme "Break the grip of tension headache", used in their recent television advertising as well as point of sale material.

The campaign runs over the five weeks until Christmas, traditionally a stressful period for many, says the company.

The advertisement invites readers to ask for the information leaflet which Merrell have produced to help deal with tension headache. Merrell Dow Pharmaceuticals Ltd. Tel: 081-848 3456.

Quicker snaps

Tudor Photographic have installed a 24 hour order hot line on 081-208 3196. Customers should have their account number, order details and delivery address ready when they call. Tudor Photographic Ltd. Tel: 081-450 8066.

Gift sets

Montagne Jeunesse have launched nine gift sets for Christmas. The sets include a honeysuckle bath milk (£1.99), a "polar bear" set, bath crystals, shower gel, three bath and body care products and a glycerine soap. Addis Ltd. Tel: 0992 584221.

Lentheric offer

Lentheric are offering a blusher brush free with any purchase from their range of colour cosmetics. The offer runs until February. Lentheric Morny Ltd. Tel: 0276 62181.

Veracur's home

Typharm Pharmaceuticals have announced that from January 1, 1992, the supply and marketing of their verruca treatment Veracur gel will be returned to Typharm Ltd. This ends the distribution arrangement previously with De Witt International Ltd. From that date all inquiries and orders should be directed to Typharm Ltd. Tel: 0202 666626.

Night light

Hago Products have brought out a night light for children. Made of white plastic, it is round with moulded sections to ease plugging in and removal. The night light comes individually carded and retails at £2.99. Hago Products Ltd. Tel: 0243 863131.

OTC Gaviscon

Reckitt & Colman have rationalised the OTC Gaviscon range. The 300ml liquid format will be discontinued and the range will now comprise of: Gaviscon liquid 200ml and 100ml, and Gaviscon "250"

tablets 24. The NHS prescription packs (500ml, 60 tablets) are unaffected by this change. Reckitt & Colman Products. Tel: 0482 26151.

Wrong number

The correct telephone number for Clarins (UK) Ltd is 071-629 2979, and not as stated in C&D November 9 issue.

Torch deals

Unichem are offering pharmacists a 17.5 per cent discount on Ever Ready Lites hand torches throughout December. They are available in blue, pink and green at £16.60 for a pack of six. The torches retail at £6.12 each. Unichem. Tel: 081-391 2323.

Pure & Clear ads

Alberto Culver are supporting their Pure & Clear range of haircare products with a £1.65 million television campaign running until the end of January. This is part of a spend totalling £3.45m in the last six months, say Alberto-Culver. Tel: 0256 57222.

Winter campaign for Fybogel Orange

Reckitt & Colman Products are continuing their consumer campaign for Fybogel Orange into the Winter.

Many customers do not understand the fundamental role of fibre in maintaining health: it acts like a sponge, absorbing and retaining water which softens and increases the bulk of the bowel contents, thus regulating bowel function, say Reckitts. "The pharmacist is a very important link in the educational chain," says product manager Helen Kellie.

Advertisements will appear in a number of women's journals, including *Living, Prima and Woman & Home*. The Winter campaign is scheduled to run until the beginning of the New Year. Reckitt & Colman. Tel: 0482 26151.

Soft looks with Rimmel Silks

Rimmel are running a promotion on their Rimmel Silks range, featuring three face products.

The Soft Focus promotion offers consumers £1 off cream concealer (£2.25), powder cream foundation (£4.79) and powder blush (£2.99). A coupon is attached to each product, offering money off this or the next purchase of Rimmel Silks face products Rimmel International Ltd. Tel: 071-637 1621.



Whitehall Laboratories have launched a spearmint flavour into their Bisodol antacid range. Launched to coincide with the Christmas sales peak, Bisodol Spearmint comes blister packed in 24 (£0.84) and 48 tablet packs (£1.42). Also coming soon from Whitehall as an insert in C&D is an "open-close" display card to indicate when the pharmacy will be open during the Christmas period. Whitehall Laboratories. Tel: 071-636 8080

Farley's run third New Year awards

Farley's are again running their First Baby award next year, giving £3,500 and a pack of weaning products to the first baby born in 1992. The maternity unit responsible for the delivery will be awarded £500 of

baby care equipment.

For 1992 there are three new awards of £350 and a pack of weaning products for three runners up in Scotland, England and Wales. Crookes Healthcare Ltd. Tel: 0602 507431.

Philip's Tracer offer

Philip's are advertising their Philishave Tracer on national radio in a new campaign. The commercial, on the network chart show,

promotes a free personal radio with purchases of Philishave Tracers until January 31. Philips Home Appliances. Tel: 081-689 2166.

Milupa help midwives

Milupa presented their first ever Midwives awards on November 18, in conjunction with the Royal College of Midwives.

The awards were initiated to help midwives who either wish to return to practice after a break, or extend their knowledge. Eight winners were chosen from all over the country. Milupa Ltd. Tel: 081-573 9966.

BEECHAM
day nurse
 DAYTIME
 COLD REMEDY CAPSULES

Helps clear a blocked or runny nose
 Relieves shivers, aches and pains
 Eases sore throat pain
 Controls coughing
 Without drowsiness



20

Beechams 10
Powders
capsules
 With Decongestant




Fast relief for colds & flu - without drowsiness

NEW **BEECHAM**
CoughCaps
 UP TO 8 HOURS COUGH RELIEF

No drowsiness
 10 CAPSULES




BEECHAMS
HOT LEMON
 COLD REMEDY



FAST cold & flu relief
 WITH REAL LEMON & VITAMIN C

10


BEECHAMS
HOT LEMON with HONEY
 COLD REMEDY



FAST cold & flu relief
 WITH REAL LEMON, HONEY & VITAMIN C

10

BEECHAMS
HOT BLACKCURRANT
 COLD REMEDY



FAST cold & flu relief
 WITH REAL BLACKCURRANT & VITAMIN C

10

WE'VE GOT COLDS & FLU SURROUNDED

Beechams have a range of winter remedies, designed to cope with every kind of cough, cold and flu symptom.

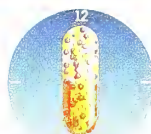
Beechams 8
Powders



Fast relief for colds, flu & rheumatic pains

CONTAC 400

FAST RELIEF FROM
 COLD AND ALLERGY SYMPTOMS



EFFECTIVE UP TO 12 HOURS FOR
 RUNNY NOSE · SNEEZING · CONGESTION

Veno's
 EXPECTORANT
CHESTY COUGHS

NO DROWSINESS



BEECHAM

BEECHAM
night nurse
 NIGHT-TIME
 COLD REMEDY



Relieves
 runny nose
 sore throat
 runny nose
 headache

night nurse
 COLD REMEDY

and so aids restful sleep

If you need to rely on a formidable army in the battle against coughs and colds, rely on the Beecham winter remedy range.

* Contac 400 is distributed by The Wellcome Foundation

SB
SmithKline Beecham

Alka-Seltzer is set for significant growth over the forthcoming festive season as a result of the many promotional activities which have taken place already during the year

First, more will have been spent on Alka-Seltzer advertising and brand promotion in 1991 than ever before, and this year's TV presence will culminate in a strong national TV campaign over the traditional Christmas and New Year period which will build upon the successful Summer campaign. No other Stomach Upset Remedy has had such a year-round programme of TV advertising.

The Alka-Seltzer advertising in 1991, on both terrestrial and satellite TV, has been designed to generate further consumer demand by highlighting both the Lemon and Original flavour variants of Alka-Seltzer, and the positive effect has already been seen in market share increases for the Lemon flavour and for the Alka-Seltzer brand as a whole.

Secondly, our service to pharmacy has been greatly strengthened by our cooperation with Warner-Lambert Health Care. Not only do you have more flexibility in ordering Alka-Seltzer, either through your Warner-Lambert Health Care Representative or direct to the Warner Lambert Sales Order Control office at Pontypool, but you can also take full advantage of the many wholesaler promotions which are available.

The message is clear. Support for Alka-Seltzer has been significantly increased during 1991, positioning it as the number one brand for 'over-indulgence' relief over the key Christmas and New Year festive season.

Make sure that your stocks of Alka-Seltzer are ready to take full advantage of the growing demand for this unique brand — one that you can recommend with confidence.



More service for the pharmacy

Six months ago Warner-Lambert Health Care, one of the most experienced and respected organisations serving the pharmacy, became the sole distributors for Alka-Seltzer in the UK.

This arrangement is already giving the pharmacy a higher standard of day-to-day service on Alka-Seltzer, and is also benefitting you as Alka-Seltzer can now be ordered at the same time from the same Representatives as the many other OTC products from Warner-Lambert Health Care. Your Representative will also be able to help with the new Alka-Seltzer POS material.

Alternatively, orders for Alka-Seltzer may be placed direct by ringing the Warner-Lambert Sales Order Control office at Pontypool on 0495 762468, or through your usual wholesaler. Three ways for you to order the extra Alka-Seltzer that will be needed for the festive season.



Alka-Seltzer set for growth over the festive season

Alka-Seltzer 60 years on The success continues

It may be hard to believe, but around the world, in some 140 countries, around 2.5 BILLION Alka-Seltzer tablets are taken for relief each year. This is real testimony to the effectiveness of a formulation which dates back to the 1930's.

Alka-Seltzer's unique effervescent formulation to relieve headache with upset stomach is clearly as popular today as the day it was launched. Consumers continue to appreciate not only its gentle effectiveness but also the safety record built up over the years.

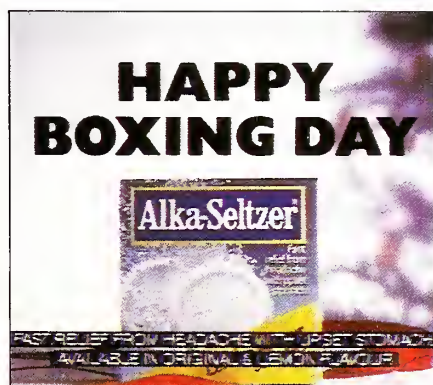
The effectiveness of the formulation derives from its speed of action. First, in relieving the bloated, queasy feeling of an upset stomach. Alka-Seltzer speeds the emptying of the stomach contents into the small intestine, normally achieving this in 20-30 minutes.

Secondly, in relieving headache. With the complete dissolution of the aspirin into the soluble sodium salicylate (achieved when Alka-Seltzer is dissolved in water) and combined with the stomach emptying properties, Alka-Seltzer's analgesic onset of action is rapid and effective.

Consumers also appreciate the convenience of Alka-Seltzer. With the foil packs the consumer can easily carry Alka-Seltzer for use even on those occasions when you least expect to need it. Now with the choice of flavours, Original and Lemon, consumers can decide which is appropriate for them. The lemon flavour is now building a following among those younger users who were not used to the Original flavour.

After 60 years of experience from around the world Alka-Seltzer has built up an enviable safety record, one that consumers recognise and appreciate. Its unique formulation and effervescent format contribute to this record. Alka-Seltzer is one of the first real global OTC brands, and it is little wonder that it has become so popular, or that so many rely on it for relief.

Here in Britain over 95% of adults recognise Alka-Seltzer as a household name, and the brand reflects this with a massive 37% share of its market. This share is growing and set to increase still further with the growing appeal of the Lemon Flavour to the younger user and the new all-year-round appeal of the brand, which is supported by the extra weight of the new TV campaigns.



The new TV face of Alka-Seltzer. The emphasis on Lemon Flavour Alka-Seltzer is already bringing a new younger range of users to the brand



Still the 'plink plink fizz' but there's a new thrust to Alka-Seltzer TV advertising

More than £1 million is being spent on Alka-Seltzer TV this year. This means heavier promotion, covering the whole country, and extending over more of the year. And our big campaign will come to a peak at Christmas and the New Year.

Sales are already on the up, because this year's TV campaigns are designed to introduce new customers to the brand as well as reinforce the strong loyalty of existing users. Already this year Alka-Seltzer TV has been covering peak holiday months and showing the place of Alka-Seltzer in travel and holidays. Now our traditional TV advertising at Christmas and the New Year will build on the impact already achieved with our Summer campaign, expanding the number of Alka-Seltzer users even further.



Merchandising aids will bring you extra sales

There's a new range of pharmacy POS material to help you take full advantage of our TV advertising — giant packs, a shelf-edger and an Alka-Seltzer open/closed sign.

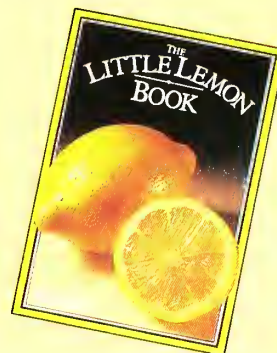
All these are free to you from your Warner-Lambert Health Care Representative or by ringing Pontypool on 0495 762468. Use them in your pharmacy, and see their impact on sales in the peak season and afterwards.



Would you like a Little Lemon Cook Book?

To help popularise Lemon Flavour Alka-Seltzer, we have printed a special Alka-Seltzer edition of this unique little book. It will be offered free to readers of several large-circulation women's magazines in the New Year as part of our comprehensive PR campaign to generate new users.

We have a small number of books over from supplying all the magazines. So, if you would like one for yourself, please send a card with your name and pharmacy address to Fiona Reeve, 30 Grays Inn Road, London WC1X 8HR. Just one per pharmacy, please, and it may have to be first come, first served!



British men still prefer wet shaving

Shaving habits die hard with British men — 68 per cent of them still prefer to wet shave, reveals the latest EIU Retail Business report.

And it's not just the old ones who dislike change — 70 per cent of the 25-34 age group wet shave, compared to 66 per cent of the over 55s. These figures contrast sharply with of other European countries, where dry shaving is the norm.

Despite the fall in volume sales, in value terms the market has grown slightly, reaching £49.7m last year, 17 per cent above 1987. The average unit price of a shaver is now £30, £6 more than in 1987.

Rechargeable shavers are increasingly popular, taking 43 per cent of sales last year compared with 37 per cent three years ago.

The women's shaver market is less than half that for men in volume terms. In value terms it rose by

£500,000 to £9.8m in 1989, which was held last year. The average unit price of a shaver is about £15. Epilators have taken off and accounted for over half the shavers sold in 1990.

Philips remains market leader, claiming about 45 per cent of sales in both men's and women's shavers. Braun second and Remington third.

For the near future, says the report, a recovery in demand does not look promising, although long term potential is there.

More Issima

Guerlain have extended their Issima skincare range with four new products.

Issima Serenissime (30ml £89) is a revitalising treatment, containing ginseng. It can be used

regularly or when skin is tired and out of condition.

Also new is Issima body serum (200ml £32), a firming, moisturising treatment. Issima creme cleanser (200ml £25) is recommended for dry or delicate skins and can be used in conjunction with new Issima moisturising lotion (200ml £22).

Guerlain Ltd. Tel: 081-998 1646.

Sweet Searle

Searle Consumer Products are offering pharmacists a free outer of Canderel 50s trial packs, worth £9.48.

To qualify, pharmacists need to order any mix of four outers from Canderel, Plix, Actomite and Dramamine. For every additional four outers, pharmacists will receive an extra free outer of Canderel tablets. **Searle Consumer Products. Tel: 0494 521124.**

On TV Next Week

GTV Grampian
B Border
BSB British Sky
Broadcasting
C Central
CTV Channel Islands
LWT London Weekend

C4 Channel 4
U Ulster
G Granada
A Anglia
TSW South West
TTV Thames Television

TV-am Breakfast
Television
STV Scotland (central)
Y Yorkshire
HTV Wales & West
TVS South
TT Tyne Tees

Actifed:	All areas except U
Askitt Powders:	STV
Beecham Hot Remedies:	All areas
Benlylin cough treatments:	All areas
Brylcreem Sensus:	C, TTV
Colgate, Actibrush:	All areas
Colgate, Great Regular Flavour:	All areas
Cream Silk:	All areas except TV-am
Halls Mentholyptus:	All areas except TVS, LWT & TTV
Minadex:	TV-am
Pure and Simple:	TV-am
Seven Seas Pure Cod Liver Oil:	All areas
Slim Fast:	GTV, G, C, LWT, TTV & TT

PRESCRIPTION SPECIALITIES

Molipaxin CR in SW England

Roussel are extending their Molipaxin range with the launch of Molipaxin CR. This is initially available only in the South West of England until further notice, says the company.

Molipaxin CR tablets contain 150mg trazodone hydrochloride in a controlled release formulation. They are blue, film-coated, and octagonal, embossed "Molipaxin" on one face and "CR150" on the other.

To relieve symptoms of depression, one tablet may be taken

as a single dose each day. The dosage may be increased to 300mg a day (600mg in divided doses in hospital). They are not suitable for the elderly who should be started on 100mg a day.

Molipaxin CR tablets should be swallowed whole. Contra-indications, warnings and side-effects are as for other Molipaxin products (see Data Sheet). Packs of Molipaxin CR contain two blister strips of 14 tablets (28 £11.62). **Roussel Laboratories Ltd. Tel: 0895 834343.**

Loceryl cream

Roche are adding to their Loceryl brand with a cream formulation containing 0.25 per cent amorolfine as the hydrochloride.

Loceryl cream is indicated for dermatomycoses caused by dermatophytes, *Tinea pedis*, *T. cruris*, *T. inguinalis*, *T. corporis* and *T. manuum*. The cream should be applied once daily following cleansing (in the evening). Treatment should be continued without interruption until clinical cure, generally two to three weeks, and for three to five days after. With foot mycoses, up to six weeks therapy may be necessary.

The treatment should not be

reused in patients hypersensitive to it. It should be avoided during pregnancy and lactation unless considered appropriate.

Patients should avoid contact of the cream with eyes, ears and mucous membranes. Skin irritation — erythema, pruritis or a burning sensation — occurs rarely.

Loceryl cream is a POM and comes in 20g tubes £4.95 (trade). **Roche Products Ltd. Tel: 0707 328128.**

Fizzy Zantac

Zantac is now available in an effervescent tablet formulation, which dissolves to produce an orange and grapefruit flavoured solution. Zantac Effervescent comes in plastic tubes (150mg 60s, 300mg 30s, both £31.25 trade); packs include an information leaflet. **Glaxo Laboratories Ltd. Tel: 081-990 9444.**

Loxapac to Farillon

Novex Pharma, who have taken over the marketing of Loxapac capsules from Lederle, are using Farillon as distributors from December 1. All future orders should go to **Farillon Ltd, Ashton Road, Romford, Essex RM3 8UE. Tel: 04023 71136.**

Nimotop IV 250ml

Bayer are adding a new size to their Nimotop solution for intravenous infusion. It contains 50mg nimodipine in 250ml bottles (0.02 per cent), and the trade price is £66.20. **Bayer UK Ltd. Tel: 0635 39000.**

Sigma addition

Sigma are introducing a new generic product made by Generics UK. Cephalixin oral suspension, presented as granules for reconstitution to 100ml, comes in two strengths: 125mg/5ml and 250mg/5ml. **Sigma Pharmaceuticals plc. Tel: 0923 50201.**

Zinnat in sachets

Zinnat suspension is now available in a pack of 14 sachets. These contain granules which are reconstituted with water and each provides a single 5ml dose of cefuroxime axetil 125mg.

Earlier this year Zinnat suspension was launched in 70ml bottles. Recent research by Glaxo has shown GPs to be divided in their preference for bottles or sachets. Making both available provides a range which should meet all demands and suit all tastes, says the company.

At £7.20 (trade), the sachets cost the same as a 70ml bottle of Zinnat suspension say **Glaxo Laboratories Ltd. Tel: 081-990 9444.**

Alvedon p.r.

Innovex are launching Alvedon paracetamol suppositories for children. Initially, a hospital-only pack of 50 will be available; a retail pack of 10 will be launched to GPs in the New Year.

Manufacturer Astra Pharmaceuticals Ltd, Home Park, Kings Langley, Herts WD4 8DH

Description White to yellowish white suppositories containing 125mg paracetamol

Uses Mild to moderate pain and pyrexia in children. Especially useful in patients unable to take oral forms of paracetamol

Dosage Children 1-5 years 1-2 suppositories (based on age and weight) up to four times daily
Contra-indications, warnings etc

Hypersensitivity to paracetamol. Caution in patients with impaired kidney or liver function

Side-effects Rare at therapeutic doses. Isolated cases of liver damage and allergic reactions reported. Redness of the mucous membrane of the rectum and minor local vascular changes have been reported. Hepatic necrosis may occur after overdose

Interactions Drugs which induce hepatic microsomal enzymes may increase the hepatotoxicity of paracetamol, particularly after overdose

Supply restriction P

Packs Blisters strips of 50 (£52.50) or 10 (£10.50, trade)

Issued November 1991

CHEMIST & DRUGGIST

PHARMACY TRAINING SEMINAR

CO-SPONSORED BY

Bristol-Myers Hair colourants

This is the 23rd *Chemist & Druggist* training seminar for pharmacists and their assistants, sponsored jointly with companies having a particular expertise in the title subject

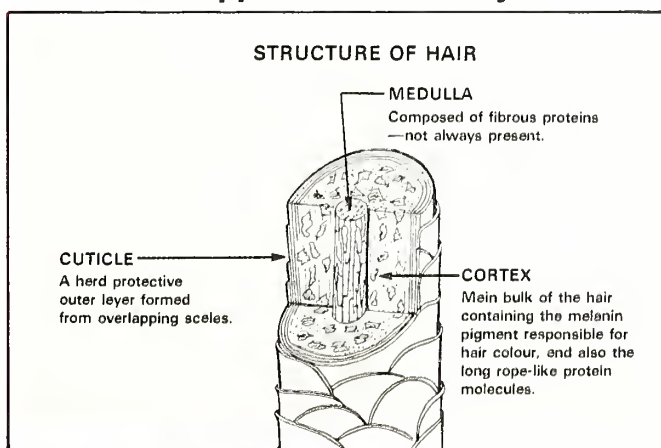
Colour science and colourants

Dyes and pigments are usually organic molecules which selectively absorb light from part of the visible spectrum. Selective removal of certain wavelengths or photons of a particular energy from white light, will mean that the eye is stimulated only by the unabsorbed photons creating the sensation of colour. Thus a red dye selectively absorbs photons having the energies of blue and yellow light from incident white light, leaving only the red energy photons to stimulate the eye.

Synthetic dyes in the textile industry dye wool at very high temperatures — this is due to textile demand for fastness and brilliance requiring dyes of larger molecular size.

Hair dyeing relies hardly at all on the above type of dyes mainly because of the demand that dyeing be carried out under comfortable conditions. Such

Professor D.M. Lewis from the department of colour chemistry and dyeing at Leeds University, explains the nature of colour and their application in hair dyes.



been variable to say the least.

Bleaching again became popular in Venice during the renaissance. The classic golden red Venetian blonde shade recorded in Titian's paintings was achieved in real life through the use of alum, black sulphur and honey.

Coloured minerals in combination with metallic salts were first used to dye hair at the turn of the century. Red or brown iron oxides or green copper carbonate were ground to a fine powder and dispersed in oil or grease. These concoctions were applied to the hair, eyebrows or eyelashes as was fashionable at the time. At around the same time a new colouring material was discovered — paraphenylenediamine and this was used as a starting material in a whole new concept — permanent hair colouring. For the first time the colour did not only lie on the surface of the hair but actually formed under the surface within the hair cortex.

Hair colouring was finally modernised in the 1920s and '30s, with the development of a range of synthetic dyes. In 1932 Clairol introduced the world's first oil based shampoo in colourant — it was mixed with peroxide and produced natural looking colours.

Hair is "manufactured" in an area under the skin called the papilla which is at the base of the hair follicle from which the hair grows. The papilla picks up protein from the blood supply and transforms them in an extremely complicated process into hair. This process of change is not really understood and research in this area could eventually lead to solving age old problems of baldness and greyness.

Every person in the world has a natural hair colour that is either dark, medium or light —

large dyes will not penetrate the fibre surface structure at temperatures acceptable for human hair colouring (20-40°C).

There are many ways to colour hair and thousands of products that are used for hair colouring. Hair colouring itself is not new and dates back well over 3000 years. The great cultures of Egypt, Greece and China all recorded the use of the vegetable extract Henna as hair dye. In the Middle East it was commonplace for men to dye their beards and tradition says that Mohammed used henna for this purpose. Even the ancient Chinese were conscious of grey hair and used various extracts of dye to mask the evidence of old age. During the Roman Empire it was considered fashionable for Roman ladies to bleach their hair using a variety of recipes based upon such materials as quick lime and wood ash mixed with old wine. Results must have



no two people in the world have exactly the same hair colour. Hair is divided into two portions. The root or living part which is the portion of the hair growing beneath the scalp and the shaft which is the visible strand of hair growing out of the scalp. Inside the hair shaft the factors determining hair colour are to be found. Nature's own colour pigment is a substance called melanin and the physical make-up of the melanin in any one person's hair determines not only the colour of hair but also how dark or light the colour is.

The melanin is found inside the hair shaft in an area called the cortex — this is where hair colouring takes place. The cortex is itself enclosed by cuticles which are a layer of flat translucent cells on the outside of the hair shaft. This layer is generally resistant and difficult to penetrate and the chemical formulae for lightening or colouring hair are designed to penetrate the cuticle and thus reach the cortex.

- A temporary hair colourant is basically a solution of dye stuffs which leaves a temporary colour deposit on the surface of the hair. This deposit is easily removed the next time the hair is washed. Natural colour will shine through the temporary deposit and therefore these products can only deepen or enhance the existing natural colour tone.

- Semi permanent colourants work by partially penetrating and laying between the cuticle and cortex. Again natural colour will shine through the semi permanent and therefore these can only be used to enhance natural hair colour or camouflage grey hair. Semi permanents are often termed "direct" dyes; the dyestuff is designed to have a small molecular structure so that it can easily penetrate the cuticles on the surface of the hair shaft.

- Permanent hair colourants work by penetrating into the cortex or inner layer of the hair and react to produce a colouring effect which is locked in. Most products are mixed with peroxide and also contain ammonia — ammonia opens the cuticle of the hair allowing the dye precursors and peroxide to access the cortex. Essential components of a permanent hair colourant are the dyestuff precursor and the oxidising agent or peroxide. When they react together in an interaction inside the hair a permanent effect is achieved. The colouring agents work with the peroxide (which also acts as a melanin bleach) to determine the depth of colour. Permanent hair colourants can be used to lighten hair colour and many popular blonding and lightening products fall into this category. Some products are quite simply just bleaches which penetrate the hair and lighten by removing the hair's natural colour. Other permanent colourants work by lightening the hair's natural pigment and depositing a new permanent colour to create a different shade.

Colour results and consumer advice

Consumer relations and technical manager at Bristol-Myers for Clairol, Bob Shepherd, explains the results that can be achieved with colourants

To many consumers, particularly first time users, there continues to be many areas of confusion in understanding the various types of hair colourants available. It is most important to understand what each type or category of hair colouring can achieve. When selecting the appropriate product to achieve a specific result, you need to have an understanding of the following:

- What is the natural hair colour?
- Do they wish to go lighter?
- How much grey hair is present?

By answering these questions you will be able to eliminate products which will not achieve the required results and reach the correct choice. To follow this simple product selection process you need to understand the different categories of colours available; what they are and what they

will or will not do.

Semi permanents

Firstly let us look at semi permanents. They can be classified into two main areas: cover grey and enhancement. Chemically, they perform their task in the same way but will achieve a different tone of colour due to the type and blend of dyes used. Cover grey semi-permanents will colour the grey hair to the shade of colour used and this newly coloured white hair will then blend in to match the natural colour.

Colour enhancement semi-permanents achieve their effects by imparting mainly warm or red tones into naturally pigmented hair, giving more depth, interest and a healthier look to the hair. However it should be understood that colour enhancement semi-permanents are not recommended for consumers who have more than 15 per cent

grey as this will result in a very unnatural tone on the white hair.

On-pack shade descriptions of enhancement semi-permanents sometimes give a false sense of security to users. The customer who selects chestnut brown because she was that colour as a girl, may find that her high percentage of white hair turns bright orange. The orange tone is required in this shade to give a chestnut tone on the natural hair colour.

Semi-permanents do not contain either peroxide or ammonia, so for a consumer who has fears about damaging her hair, she can be assured that the formulation will actually enhance its condition.

Semi-permanents vary according to brand in their effectiveness in grey hair coverage. As semi-permanents work by adding colour to the hair, they can enrich the natural colour both when colouring grey and by enhancing the

The colourants market and the consumer

Tim Perman, group product manager for Clairol at Bristol-Myers, discusses the colourants market and consumer trends

The hair colourants market is currently valued at around £76 million at retail prices, and around 40 million units are purchased by consumers annually. During the 1980s colourant sales were in a slow decline. However, the market has witnessed something of a resurgence at the start of the nineties with volume sales stabilising and some value growth predicted during the next two years.

One of the main reasons for this development has been the recession — with less money to go around many women have not been able to afford to have their hair coloured at a salon as frequently and they have turned to using hair colourants themselves at home.

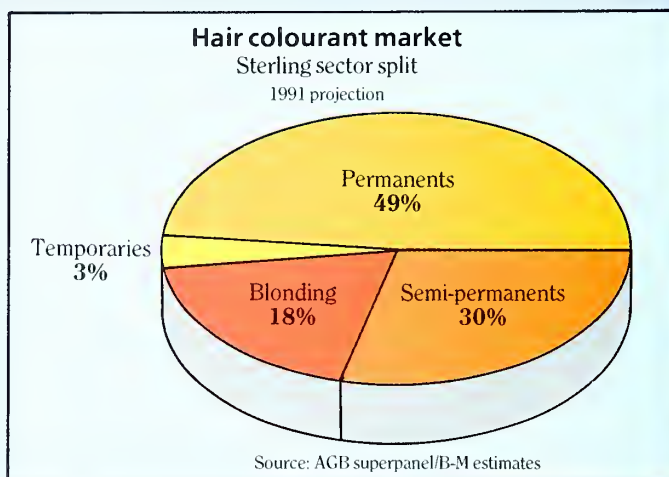
Colour trends have also played their part in revitalizing hair colourant sales. With natural, subtle colours in vogue, more women have been drawn to semi-permanent hair colourants which blend warm tones into naturally coloured hair without long-term commitment.

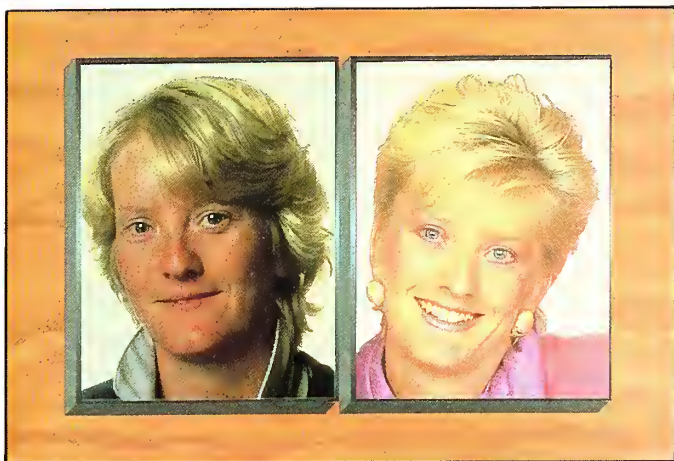
Market sectors

The hair colourants market is made up of four main sectors. The permanent sector is the largest and accounts for around half of all colourant sales — about £38m. The dominance of permanents has lessened in recent years, with consumer trends towards more natural

results and concerns growing over hair becoming damaged. However, permanents remain a heartland for colourant sales and their importance should not be overlooked.

Semi-permanents are the fastest growing sector, now accounting for about 30 per cent of sales. This sector is driven by two sets of products — those





natural colour. Because of the non-peroxide formulation, the natural hair colour is not changed, so no re-growth will be experienced and the colour will wash away over several shampoos. This is reassuring to those customers who do not wish to make the total commitment to either hair colouring or the particular shade used. Consumers can easily change shades with semi-permanents, either using lighter shades as their skin tone becomes paler with age, or for enhancement semi-permanent users who may wish to change shades to follow changing fashion trends. Semi-permanents will not lighten the

hair; only permanents or lightening products will have this effect.

Permanent change

Permanent hair colour, because it is used with hydrogen peroxide, can lighten the hair by up to four shades. Permanents can darken the hair by any amount, through to black if required, and whether going lighter or darker varying tones such as ash, red or gold can be introduced. As permanents have the ability to lighten hair it is possible to achieve quite dramatic effects which add strong red tones to a lighter base.

Although permanent hair colours have the ability to lighten natural colour and at the same time impart a new colour, hair lighteners will only remove natural colour. The degree of blonding achieved with hair lighteners varies. It is possible to achieve mild degrees of blonding by using simple spray in-lighteners which produce a natural sun-lightened look, but these types of products should be confined to lighter hair colours. At the other end of the scale there are lighteners which are capable of lifting the natural hair colour, regardless of how dark it is, up to blonde. In these cases, it is advisable to tone the hair to the required blonde shade after lightening.

To take hair from black to blonde, although it is not always advisable, the hair will have to pass through seven stages of lightening. One of these seven stages is red/gold or orange and a common problem experienced with first time users of hair lighteners is that they remove the lightener too early. It may be that they check the lightness when the orange stage is reached and in a panic remove the lightener from the hair. However, re-application of the lightener will easily rectify the problem. If a milder type of hair lightener is used on brown hair, which only marginally lightens the hair, the resultant shade could be orange in tone. Therefore the key to successful

lightening is: select the product that will provide the required level of lift, and then allow the lightener to develop until the required degree of lightness has been achieved. To lighten hair from black to blonde can take up to two hours.

Shade choice

To match the product and shade to the individual's wishes, you need to understand the suitability of certain shades for certain skin tones.

When covering a high percentage of grey it is generally advisable to use a lighter rather than darker shade. This will be softer and more natural to the skin tone, which tends to lighten with age. Customers with highly coloured complexions are more suited to cooler, more ashen tones, whereas people with fair or pale complexions suit a warmer golden tone. Additionally we live in an age where our hair is exposed to many external influences which can have a drying effect on our hair. Sunshine, chlorine in swimming pools, heated appliances and permanent waving can all cause the hair to become more porous, which may result in the chosen shade overaccepting, giving a much darker result than anticipated. So as to ensure the colour result is as required, it should be recommended that the customer carries out an initial strand test.

that cover grey hair and those that colour enhance brown hair. Semi-permanents are popular because they are easy to apply, because they blend in with the natural hair colour, have a more gentle working effect and fade or wash out over a short period of time.

The blonding sector is made up of bleaches and lighteners plus highlighting kits and accounts for around 18 per cent of sales. Blonding products tend to sell well according to the fashion role model of the time — Madonna can have a big influence on this market! Most blondes these days are looking for a natural, subtle shade — not a brassy, dramatic transformation. However, blonding products sales have declined slightly along with permanents due to the rise in importance of semi-permanent products.

The fourth and smallest sector of the market is temporaries and only accounts for around 4 per cent of sales. These products are fashion driven and have steadily declined over the years.

Main players

The hair colourants market is dominated by five major manufacturers. Clairol are the largest with over a third of sales, followed by L'Oréal with 17 per cent and Garnier with an 11 per cent share. The other major players are Elida Gibbs and Wella who both have around 10 per cent share of colourants.

Clairol dominate the permanent and semi-permanent

categories. In permanents Clairol's Nice 'n' Easy is ahead of Recital and Belle Colour with only Wella's Colour Confidence making any other impact. In semi-permanents Clairol's Loving Care accounts for over half of sales with Harmony coming next. In the blonding sector Clairol's Born Blonde takes over 40 per cent of sales.

Pharmacy role

Pharmacy outlets play a major part in selling hair colourants to consumers. Although grocery stores have seen a slight growth in 1991, over 90 per cent of hair colourants are still sold through chemists and drugstores. Of these around a third go through independent chemists and pharmacies.

Research carried out by Bristol-Myers indicates that around 20 per cent of women in the UK, (about 5 million people), use colourants regularly. Although women of all ages use hair colourants, usage is heaviest among 35 to 55 year old women. Interestingly there has been recent growth in 25-35 age groups and many of these women are being attracted to semi-permanent products. There is also a potential market of 6.25 million other women who only use hair colourants occasionally or stopped using them recently. Around 15 per cent of women have their hair regularly coloured at a salon, although this figure has declined slightly.

Most women, dependent on the product type used, colour their hair between six and eight

times a year. Motivations for colouring hair are usually derived from a desire to lighten or enrich the existing mousey hair colour or to cover grey hair. Psychologically women colour their hair to give themselves a boost and in research they talk about how having coloured their hair makes them feel rejuvenated, confident and more feminine.

However many women have concerns about putting chemical colourants on their hair and apprehension about damage is common. In fact most colourants incorporate intensive conditioners to be used after colouring so that the hair can be kept in good shape. Even so, products that communicate a non-damage, non-irritant image stand the greatest chance of bringing new users into the market.

Trends

Colour shade trends over the last few years have centred around subtle tones. This has led to a greater acceptance of natural shades. Rather than the blue-blacks, bright burgundies and dazzling white blondes of a decade ago, the focus for some time has been on subtle soft colours. The perfect colour has become the one closest to the consumer's natural colour as possible. There is still a place, particularly during the Winter months, for brighter, lighter tones but the emphasis will be on warmth and richness rather than vibrancy and boldness.

We have discussed women's usage of colourants but what

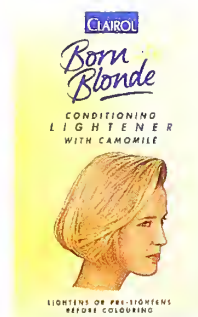
about men? Men have long been suspected of buying and secretly using women's cover grey products but recent activity in this sector suggest there is even greater usage. With the advent of wider product choice and television advertising behind certain brands this may be a sector to watch. What we do know is that around 5 to 7 per cent of men use hair colourants and most products on sale are gradual restorers of colour to grey hair.

In many ways pharmacists are in an ideal position to sell colourants — as we have seen, consumers need reassurance and advice and pharmacies can give this personal help. Most questions can be easily answered by reference to the packs, in-store leaflets or shade guides that are available.

Colourants are best merchandised using the trays and hair swatches that are available and it is important where possible to stock a wide range of shades. There are many theories as to the best way to plan the display fixture — our recommendation is to place semi-permanents at customers eye level with permanents below and temporary colourants and blonding products above.

It is also important to highlight promotions, leaflets or coupons clearly on shelf. Any price promotions organised through your local wholesaler should be flagged at point of sale — unless the discount is passed on to the customer no real benefit will be gained from this type of activity.

The colours of money.



From Clairol.

Clairol, the number one colourant house has seen its share rise to over a third* of the market in 1991.

But that's still not enough for us. By the end

of 1991 we will have spent £5.5m** on TV and in press supporting the Clairol brand name.

So stock the full range now and let Clairol show you the colours of money.



BRISTOL-MYERS

BRISTOL-MYERS CO LIMITED, SWAKELEYS HOUSE, MILTON ROAD, ICKENHAM, UXBRIDGE UB10 8NS TELEPHONE 0895 639911 FAX 0895 636975 TELEX 925374

*AGB Superpanel £MAT 4.8.91. **Combined Clairol spend colourants/appliances.

The myth of the machine

With or without mechanical and electronic help, one of the main aims of stock control is to make money work harder. To achieve this the pharmacist must optimise both the rate of stockturn and the gross margin made at each turn.

In principle this can be a very worthwhile exercise; the potential savings to be made by increasing the stockturn in a pharmacy can be well into five figures, as the table illustrates.

To make the comparison, a keen eye must be kept on the result of multiplying gross margins by number of stockturns for a year. In this example I have taken a pharmacy with a total turnover of £260,000 per year, and with a gross margin of 25 per cent overall. Sales at cost are therefore £195,000.

Number of stockturns per year	Stockholding at cost (approx)
4	£49,000 (ie £195,000)
5	£39,000
6	£32,500
7	£28,000
8	£24,500

Stepping up stockturn by even a single unit, say from five to six or six to seven, can release more than enough capital to install an EPOS system. In principle, such a system should make a higher stockturn readily attainable. With the frequency of deliveries enjoyed by almost all pharmacies there should be no bar to a five-figure reduction in stock. Consider: is it necessary to hold two or three months' supply of stock which many, if not most, privately owned pharmacies carry?

EPOS power

An EPOS system can perform in the front shop the tasks a computer already undertakes in the dispensary for many businesses. In the dispensary you can be informed of the maximum daily demand, during the previous two or three months, for any product. This in turn means you can arrange selective automatic re-ordering. (The computer can only, of course, work on information fed into it).

Similarly, an EPOS system can produce data on the rate of stockturn of individual OTC lines, provided sales at cost, deliveries at cost, and the opening stock-holding are entered. Time and trouble! But the effort is well rewarded as it highlights the shelf-warmers. As stressed earlier in this series, effective stock control must be analytical: overall stockturn information is useful, but we must be specific.

Watertight

The computer-produced results are on the assumption there have been no leakages, that security is watertight. However, the evidence is that such an

In the fifth of his series on the principles of stock control, Eric Jensen, MPharm, BCom, casts an economist's eye over modern pharmacy computing and argues that while computers have the potential to help boost stockturn, any real efficiency improvements still begin with the pharmacist

assumption is misleading, which means there must be physical stock-checks. Here is where independent professional valuers complement the physical checks made by the staff.

Professional valuers must, if their services are to be used to fullest benefit, be carefully briefed by the proprietor. Information should be given on buying policy and a consistent

procedure agreed as to what constitutes doubtful-value or no-value stock. It is vital that stock should not simply be counted and valued, but that its condition be noted. This is another reason for physical checks.

Admission of guilt

In general, those who buy stock hate to admit to having made a buying error. Professional valuers take a detached impartial view: that is part of their job and usefulness.

Where leakages are suspected an external professional valuation should be arranged at once. An unpleasant fact, according to security experts, is that perhaps more than half "in shop" losses are not due to shoplifting! This is an overall figure for retailing and clearly will not be true for every business.

A warning sign of leakages is when cash to pay suppliers is short and the cash deficiency is not matched by an increase in stock. Where is the money or stock? If the shortage cannot be accounted for, prompt action is needed. To wait for the annual stocktake could mean that the culprit, if there is one, has left.

Minimalism

One computer expert told me he used his machine to the minimum: he decided what information was essential to his business and would not be drawn into collecting data he had not the time to study. There is a danger that facts can be amassed for their own sake. Decide whether your computer is a business tool or a hobby too.

The following points might provide food for thought

1. According to Fairscan, a computer system has no value after three or more years use. The hardware is likely to be superseded and the software is only of value to the user. So consider the pros and cons of leasing instead of buying outright.

2. An EPOS system can be converted into EFTPOS. But with the average cash value of transactions in most pharmacies being relatively small, is fund transfer at the point of sale likely to be justified? Will cash transactions be outdated?

3. Efficient stock control, with accurate valuations of gross profit and rapid stockturn, is a valuable factor when a pharmacy is for sale. Purchasers set greater value on independent valuations by the professionals, and smaller stocks keep down the total capital requirement.

4. Any system must be designed to suit the particular pharmacy. A computer will not increase efficiency unless added to a previously efficient set-up.

5. The proprietor pharmacist should ensure that he/she as well as staff is familiar with the operation of the EPOS system. Delegation is valuable but the owner cannot afford to be out of touch with the mechanics.

6. The human aspects of computerisation should not be overlooked. Consider the effects on staff, suppliers, and customers. Many people dislike machines, especially electronic ones.

7. The ideal arrangement might be a combination of computer, staff sectional checks, and independent valuers. Instead of the one annual professional valuation you could ask for a quotation for two or more. Try to do a deal by enabling the valuers to cope with the peaks in demand for their services by employing them during the less busy periods.



EPOS economics

An EPOS system might cost in the region of £4,000 and could help make possible economies in stockholding of anything from a few thousand pounds to over £20,000 in some pharmacies. The interest savings alone, quite apart from all the other costs of holding stock, suggest the £4,000 would be a rewarding investment. It must, however, be remembered that time and training will be required when installing and running the system. No system can function efficiently unless used efficiently.

A close cost/benefit analysis is essential before investing in EPOS. Stock control by the traditional methods is not outdated, and computers cause added work in some directions while saving large amounts of labour and drudgery in others. Potential buyers must assess carefully the time involved in using various systems which often tends to be overlooked.

Intercare Products — building for success

In only seven years, Intercare Products have become established as one of the fastest growing OTC companies in the UK. Already a major supplier to pharmacists with a portfolio of successful brands, Intercare are now set to become a "top ten" OTC company with an extensive range of products covering a broad spectrum of self medication areas.

Part of the Sandoz Group, the world's eighth largest pharmaceutical company, Intercare have a policy of investment — in product development, product acquisition and trading partnerships. This, coupled with brand support and a commitment to the pharmacist, has seen the company grow to its present £12 million turnover at retail.

Product development

Product development has played an important role in this growth, the most recent example of which is the launch of the new Tixylix range earlier this year. Tixylix was already well established among pharmacists as their "number one" choice for night-time cough relief, but mother and pharmacist research unveiled the need for a wider range. By developing three new cough and cold medicines specially formulated for babies and young children, and including them under the Tixylix banner, Intercare answered that need. In addition to the original Tixylix night-time



cough medicine, the range now includes: Tixylix Daytime, Tixylix Cough & Cold, Tixylix Decongestant Inhalant.

The new Tixylix paediatric range has been developed for pharmacy-only distribution and will be promoted from December throughout the peak cough and cold season with a £750,000 advertising campaign in the national press and leading mother and baby and women's interest magazines.

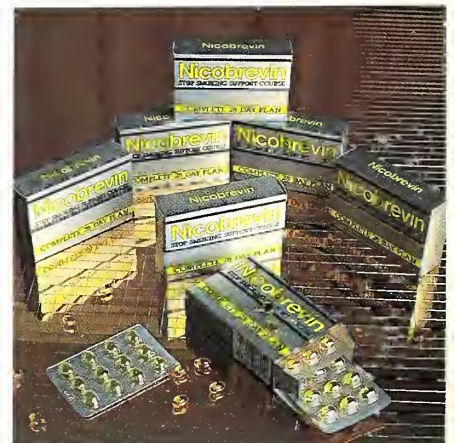
All Intercare developments have been built on the company's OTC experience with products which include the Aller-eze hayfever range; Ex-Lax, Brooklax and Bonomint laxatives; Hemocane anti-haemorrhoidal preparations; Triogesic and Triominic cough/cold remedies.

Acquisitions...

Although the new Tixylix range is entirely an Intercare development, the original Tixylix night-time cough medicine on which the range is based was in fact acquired by Intercare in 1988. Since that time sales have been significantly increased, but the company recognises that Tixylix brought with it a 25-year prescription heritage and strong pharmacist support, which were important factors in its success, and provided the firm basis needed to realise Tixylix's full potential.

Nicobrevin "stop smoking support course" similarly showed potential for growth in the hands of Intercare which was prepared to invest knowledge and expertise

in this underdeveloped area. Intercare acquired Nicobrevin and, by demonstrating clinical efficacy, gained a Pharmacy-only product licence in 1987. Since then, sales of Nicobrevin have topped £2 million at retail and the brand is now one of the first choices for pharmacy recommendation. Nicobrevin is a non-nicotine therapy formulated to reduce craving for cigarettes and counteract nicotine withdrawal symptoms from the first day of "quitting". This year, Intercare are promoting Nicobrevin with an advertising spend of £350,000 during the peak winter season.



...and trading partnerships

A significant contribution to Intercare's growth has resulted from trading partnerships formed with companies attracted by its expertise in the pharmacy area. In 1990 Intercare became responsible for the distribution of Allergan lens care products in pharmacy — one of the fastest growing OTC markets. Now the pharmacy trade sector accounts for over half of all contact lens care sales and the Allergan range is No 1 within it.

Similarly, Stiefel, a leading dermatological company in the prescription market, came to Intercare for the OTC launch of Oilatum Skin Therapy on a test market basis in London and the South East. Oilatum is being supported by advertising and is on course to take a predicted major share of the medicated bath emollients sector.

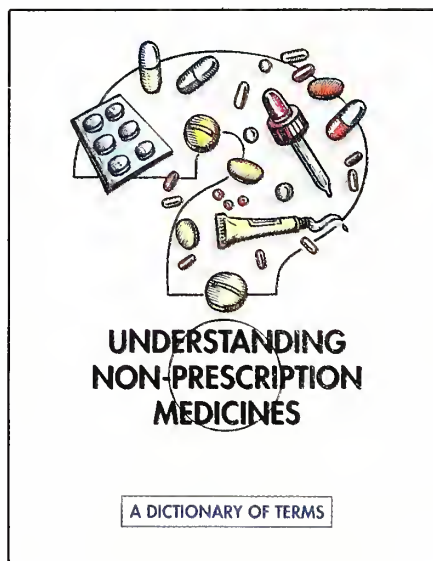
Understanding OTCs

During 1991, work has been continuing to promote the pharmacy as a first port of call for advice and information on self-medication. In co-operation with the National Pharmaceutical Association, Intercare have produced a new Dictionary of Terms to help consumers understand non-prescription medicines.

The Dictionary explains unfamiliar

wording that can be found on packaging and in-pack leaflets, and also acts as a reference for minor medical conditions and their treatment.

It is particularly helpful in slicing through pharmaceutical jargon by giving simple,



clear explanations of terms. There is also space for a personal medical reference to note down pharmacist, doctor and dentist details together with National Insurance number and blood group.

All Intercare representatives carry supplies of this Dictionary and a specially designed holder for the pharmacy counter which are available free to pharmacies on request. Alternatively copies can be obtained direct from Intercare, 7 The Business Centre, Molly Millars Lane, Wokingham, Berkshire, RG11 2QZ. Tel: 0734 790345.

Serving pharmacy

As the pharmacy is the only environment where medicines and their proper use can be fully explained to the consumer, Intercare invest in support for the pharmacist and his business. A 14-strong sales team is trained to offer advice on stock policy and product information. Representatives can also supply a comprehensive range of merchandising and display materials to assist pharmacists in their advisory role.

With a positive policy on information and training, Intercare provide "counter prescribing guides" for each of their products, and information leaflets to help pharmacy assistants and customers understand self-motivation in therapeutic areas like hayfever, smoking and dry skin treatment.

Assistants — win a personal CD player

Win one of five personal compact disc players and get a free wall mounted emergency torch for every correct entrant.

Test your knowledge of medical or technical terms relating to the Intercare product range. You will have to consult your stock packs and the "Understanding non-prescription medicine dictionary of terms", so if you don't have a copy then 'phone Intercare on 0734 790345.



1. The Tixylix cough and cold range contains three liquids with a cough suppressant. **Name the three liquids and explain what a cough suppressant is**

.....

2. Tixylix Decongestant Inhalant is formulated to relieve a blocked nose caused by catarrh or a cold. **What is catarrh?**

.....

.....

3. Aller-eze contains a fast acting antihistamine that helps relieve the symptoms of allergic rhinitis. **What is allergic rhinitis and what is the name of the antihistamine in Aller-eze?**

.....

.....

4. Nicobrevin stop smoking support course contains a BN or batch number. **What do batch numbers or codes indicate and where is it positioned on the Nicobrevin pack?**

.....

.....

5. Hemocane is formulated for the fast relief of haemorrhoidal pain because it contains an anaesthetic. **What is an anaesthetic?**

.....

6. Intercare supplies a range of laxatives including Ex-Lax, Brooklax, Bonomint and Senlax. **What is a laxative?**

.....

.....



7. Triogesic combines an effective decongestant with an analgesic to clear nasal and sinus congestion and relieve headache and pain accompanying colds and sinusitis. **What is sinusitis!**

.....

.....

Tie breaker

Write your entries down and send to Freepost RG494, *Chemist & Druggist Competition*, Intercare Products Ltd, 7, The Business Centre, Molly Millars Lane, Wokingham, Berkshire, RG11 1BR. No stamp required.

Entries must arrive by December 31, 1991.

In not more than 15 additional words complete the phrase "Understanding non-prescription medicines can help me in my job because

.....

.....

.....

Name:

Pharmacy address:

.....

.....Telephone:

Rules

1. The judges' decision is final. 2. All entries must be mailed to the competition address to arrive by December 31. 3. Winners will be notified by post within a fortnight of the closing date. 4. Employees of Intercare Products Ltd and Benn Publications Ltd and their families are not eligible to enter. Only one entry per person. 5. No cash alternatives will be offered. 6. A list of winners will be available from Intercare Products Ltd.

Reasons to be cheerful

Trading in a declining shopping precinct has obvious problems, but there are still ways to build up business, argues consultant John Kerry

This 150sq ft pharmacy was established by Mr R in a 40-shop, out of town precinct, some seven years ago. In the days prior to rational location he decided that he could carve out a business from the local population of almost 15,000 in this new satellite village which was already served by six GPs and an established multiple pharmacy.

He was right, and currently both pharmacies have a monthly turnover of circa £26,000.

Mr R didn't leapfrog his competitor, but placed himself further from the surgeries and as a result has a better OTC turnover, but loses out on script items.

The business enjoys an enviable 50/50 NHS/OTC split, but of course because the turnover is modest so is the monthly script count at 1,700.

Residents of this suburb of private semi-detached houses, built in the early '60s, are mostly established families either with teenage children or their offspring flown the nest. The most profitable age groups for community pharmacy, babies or senior citizens, are in short supply. The majority are of working age and mobile, needing less routine medical attention and are more likely to shop at superstores.

Fading precinct

These demographics and the current economic recession have taken their toll on the whole precinct. With falling turnover and profit the shops have started to decay at the edges. Others, predictably, have deceased and the boarded-up, often graffiti-covered shells hardly make the precinct attractive for shoppers.

Mr R is suffering in a similar way to his neighbours. Fortunately, script numbers have held up and OTC medicines provide a steady turnover of £2,600 per month, approximately 25 per cent of his till takings.

No departmental breakdown of sales is available, but certain categories have been routinely measured recently.

OTC medicines (£)	2,600/month
D&P (£)	1,400/month
Health foods (£)	800/month
Fragrances/gifts (£)	550/month
	£5,350
Total counter	£11,900/month

Any other measure of counter business is subjective and Mr R believes that while OTC

medicines, D&P and haircare are strong, baby care has fallen away and others such as skincare/cosmetics, health foods, fragrances and general toiletries are weak.

The population is static, and Mr R believes that his only real hope for growth is in the front shop. Three supermarkets in the precinct have discouraged him from attempting to build custom with a cut price policy. He just cannot compete, although his prices are pretty good.

Counter growth

It would be wrong to suggest that there is huge scope for counter growth, but there is certainly some to go for. It would be wiser to consider building the customer base as a priority. This strategy in itself would increase the script business almost by osmosis.

The main strategy must be to attract more customers to the pharmacy, and this can be achieved by employing the following four point plan:

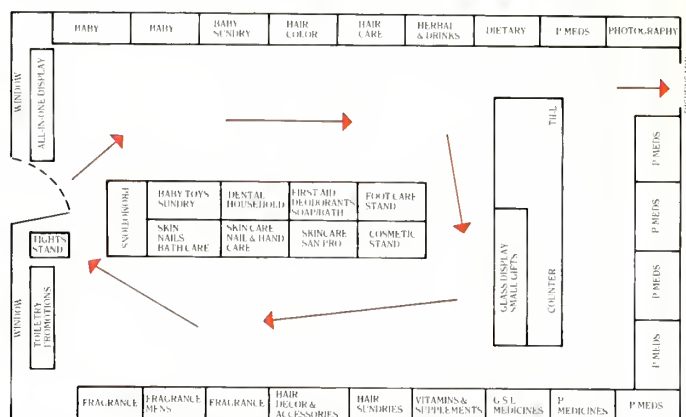
1. Make the shop more attractive to customers.
2. Provide a much better shopping environment.
3. Give the local residents more reasons to visit the pharmacy.
4. Communicate effectively with all potential customers.

Before suggesting tactical improvements and activities, it is necessary to cast a critical eye over the business:

- Shop sign/fascia. An out of date fascia, ravaged by time, topped by an equally unimpressive low-budget and unattractive sign.
- Very dark windows, with virtually no displays and high unsightly backs of manufacturers stands facing outwards.
- Budget shop fittings of mixed parentage, piled high with stock and unfortunately even the canopy tops are bending under the weight of untidily stored over stocks.
- The shop has a tacky, shabby and dull appearance, due not only to the above points, but also its age and over use. Not a credit to modern retail pharmacy in the '90s.

Recommendations

- ☐ A new shop sign — illuminated box type if possible.
- ☐ A new shop-front or good paint job on the existing one.
- ☐ Bright lights in the window.
- ☐ A programme of attractive window displays.
- ☐ Removal of stands backing onto the window or at least covering them with a curtain.
- ☐ This is probably an instance where a new shop-fit would work.
- ☐ Cut the 6ft high gondolas down to at least 5ft.
- ☐ Place stands in areas where they neither obstruct nor obscure, at gondola ends or



The current layout: too much babycare

Pharmacy type:

Independent — Sole trader

Location:

Large precinct, satellite township

Type of premises:

Single post war shop unit, 750sq ft
shop front

Products:

Conventional retail pharmacy lines

Competition:

One multiple pharmacy, three supermarkets

Financial year January-December 1990

	£	
Total sales (NHS and counter)	294,000	
NHS	150,000	
Counter	144,000	
Purchases	221,000	
Closing stock	47,000	
Gross profit	79,000	(27%)
Wages and National Insurance	30,000	
Rates and water	2,500	
Light and heat	1,150	
Motor expenses	1,750	
Insurance	900	
Repairs and renewals	900	
Telephone	800	
Postage, printing and stationery	1,850	
Advertising	1,700	
Accountancy and professional fees	1,600	
Bank charges and interest	8,700	
Cleaning	500	
Sundry expenses	600	
Subscriptions	1,100	
Equipment rental	1,350	
Depreciation	3,700	
Net profit	19,900	(6.7%)

against the backs of wall
fitments with shelves
removed.

- ☐ With or without the new shop fit, using the canopy tops as a stock room is not only hazardous but unsightly.

Clearly not only will the above cost a lot, but will drastically reduce display space for merchandise by up to 25 per cent. Mr R has a retail shop which will accommodate a strictly limited amount of displayed merchandise. Over the years he has squeezed more and more in and piled it higher and higher and the result is neither pretty nor practical. There is this well known piece of retail folklore, which claims that the more stock you have in a shop, the more that you sell. Up to a point this can be true, but not as in this instance, when you can neither

see it all or reach it, and where it makes the place look dull and untidy.

The solution for Mr R is to get shot of a lot of stock; up to a third of it has to go. This clearance will make room for both the repositioned stands and new lines that need to be introduced. He must:

- Sell off lines and ranges that don't earn their keep
- Reduce the space given over to nominated slower sections to 50 per cent of their current allocation and increase allocation to the stronger departments.

It would be wise to introduce a stock-control system and use it not only to identify slow-sellers and ranges to de-list, but also to help reduce the over-high stock figure. Mr R is probably not ready for a computerised stock

Weak departments for reducing

Babycare
Health foods
Skincare
Toiletries

Strong departments for increasing
Haircare
Photographic
Sundries
Hair-decor and small gifts

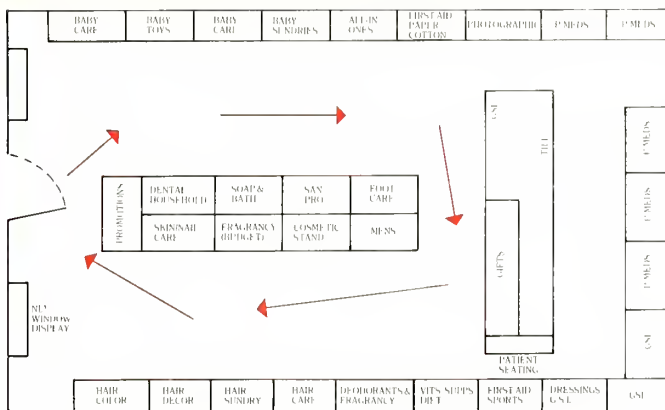
control system, but sensible use of the existing card system should pay dividends.

New line ideas

With a newly fitted, brighter, more comfortable and convenient shop, it is now time to consider new lines to sell to existing customers and to attract new ones.

Baby sundries and toys have potential not only for the diminishing local baby population, but as impulse buys for the thousands of aunts, uncles and grandparents who live locally.

Photographic sales in this pharmacy, particularly processing, are excellent and this needs exploiting. First of all, film stock should be moved to a more prominent position and then enlarged to offer more choice. Better signs for D&P in the shop are recommended. Sundries such as albums and photo frames are excellent impulse lines and why not put in a range of inexpensive cameras?



Suggested revision: more photographic and hair care

With haircare products also selling well, it should be profitable to expand the sundries and decor side. Mr R would do well to stock more brushes, ornaments, small electricals.

Situated as it is, several miles from the busy awkward to park in town centre, Mr R could profit by offering a small range of gifts for birthdays, anniversaries and especially Christmas.

Healthcare trends

Lastly, but by no means least, the trends in healthcare cannot be ignored. Although health foods have not worked in this pharmacy, vitamins have. This small section should be enlarged and given more prominence. After all, a whole new range of vitamins only take up one

shallow shelf. Supplements, and there are a lot of these, should be merchandised in this enlarged section together with herbal remedies and homoeopathically prepared remedies. These could be good profitable business from a small section along these lines.

With more and more people participating in active sport the call for treatment has never been greater. Manufacturers have responded with well designed and effective supports, strappings and sprays, but few pharmacists offer a comprehensive range. Why should the sports shops, which tend to be bigger, have all of this business? Ideally this should be merchandised on an extra two or three shelves near the old fashioned rubs, liniments, sprays and crepe bandages.

Mr R, like any other pharmacist, or any other retailer for that matter, has to offer services and products that are "special". By reducing stocks of the conventional and price sensitive, and by adding exclusives, the shop will earn a reputation for these and the local population will go out of their way to call.

Word of mouth

There is no better advertising than word of mouth — none cheaper either. However, Mr R may feel that the new look pharmacy with new exclusive lines needs to be better publicised and the following conventional tactics are recommended:

- Well illuminated window displays are a must
- Tasteful lettering applied to the window surface publicising some specialities, for example, photography
- Flyers, regularly distributed door to door, or as bag stuffers, publicising exclusives or bargains.

This out-of-town retail pharmacy is one of thousands hit by the recession and increasing local competition to its counter trade. It can survive and prosper by embarking on a modernisation programme, rationalising on stock, introducing new lines, revising the layout to maximise the business strengths and communicating effectively with the local population.

The outlook is dry

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Reference 1. First Licensed in USA July 1975.

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Licensing multivitamins not a feasible financial proposition

Full marks for the article on para-pharmaceuticals in *C&D* October 26, and the need for better regulation of the quality, safety and efficacy of these preparations. While I wholeheartedly agree that the product licence route is the appropriate one for all such preparations, including multivitamin products, there are very severe financial drawbacks for these sometimes complex products.

The problems lie with the Medicines Control Agency's fee structure. Since being made financially independent in April 1989, the MCA has increased its capital fees astronomically. While I understand the reasons and the need for this in most cases, this new fee structure is very prohibitive to multi-ingredient formulations, which many of these para-pharmaceuticals are.

If we take the example of a common multivitamin and mineral preparation, be it a tablet, capsule, dry powder, or liquid, the product typically has 5-25 active ingredients. Clearly, to establish even the stability of such a preparation would be difficult (and expensive) enough, what with having to develop and validate analytical and stability indicating methods for each of the active ingredients, but some of the bigger problems might only begin when the product licence was granted. The capital licence fee alone would currently be £7,000 (standard abridged) per product.

With the recent publication from the Committee on Medical Aspects and Food Policy (COMA), "Dietary reference Values for Food Energy and Nutrients for the United Kingdom", a new set of daily recommended levels have entered the arena, to rival the long established RDA's (recommended daily allowances) of both the US and the UK. Of course this is a good thing, but if licensed nutritional products wish to reformulate in line with any of these new recommendations, then the product licence variation fees are prohibitive. The current categories are as follows:

- Complex £8,500
- Standard £280
- Administrative £80

My main bone of contention here is not the cost of each type of variation, but the *definition* of what type of change merits what category of variation. Under the current set of definitions, altering any active ingredient attracts a complex fee. This must surely be ludicrous if, for instance, the level of vitamin A in a multivitamin is increased from 750mcg to 800mcg, in order to comply with a more recent standard.

"Get it right first time", I hear you cry! This is a very good



The Leader of the Opposition, Neil Kinnock, last Friday joined the 800 workers at Parke-Davis' Pontypool manufacturing plant to celebrate the company's UK centenary. He is seen here with Parke-Davis operations director David Stoker (left) and Alan Walker (right), president, UK and Ireland, unveiling a plaque to commemorate the centenary

concept for all products, but the changing face of the nutritional and para-pharmaceutical market requires companies and their products to be flexible. Also, is it really necessary for each flavour of a product to have a separate product licence, attracting a reduced but still substantial fee? Also, an active ingredient change may affect a number of flavours of a product, *each one* attracting a separate variation fee.

If the MCA has serious intentions towards getting para-pharmaceuticals licensed, then there has to exist a workable framework for these type of products. Product licensing in the UK is the most expensive in Europe (but also the fastest) so I

feel that a specific structure for nutritional/para-pharmaceutical products is not too much to ask. If the MCA wants to discourage the "fast track" marketing method you describe, then a viable licensing alternative has to be provided.

John P. Cogan, BSc, M.BIRA

Cracks in the ethical fabric

When large companies openly and fearlessly ignore the waves of resentment they instigate, by offering vouchers or extra quantities of medicinal products



As part of the Royal Pharmaceutical Society's sesquicentenary celebrations, Doncaster Branch held a dinner dance at The Moat House, Doncaster, on November 21, with guests David Coleman, president of the Society, and the Mayor of Doncaster, Councillor Mr W.R. Gillies. The Mayor accepted a cheque for a four figure sum on behalf of the Doncaster Hospice Appeal from Branch chairman Janet Midley. The Branch has been fund raising for the appeal throughout the year

free with certain purchases, one can only assume they are "testing the temperature of the water".

No organisation with a strong network of control could possibly let such a serious matter pass through the system by accident. I fear this is a case of the giant choosing to challenge the rules that, until recently, they have staunchly upheld and watched over with a most diligent eye. Could it be that the strength of the smaller multiples and drugstores is now causing them sufficient concern that they wish to rewrite the rules, or even perhaps change sides?

Price maintenance, as history shows, is only as strong as the large companies decree. Whether they be manufacturers, distributors or retailers their strength is in co-operation through associations. Are we now witnessing the first cracks in the ethical guidelines being created by the strength and power of the big multiples' philosophy?

P.J. Tyler
Norwich

Objection...

I object to the suggestion made by John Croft, director of Scientific Marine, in his letter (*C&D* November 16) that I do not know what I am talking about with respect to the product Seaton. He suggests that my reference to it was an unfortunate accident and done in ignorance. I refer to our article on Seaton published in the *Pharmaceutical Journal* (May 26, 1990). I have looked carefully at the existing scientific evidence on the use of this product in the treatment of arthritic conditions. I will simply restate that at present, although an anti-inflammatory agent has been isolated from New Zealand green lipped mussel, there is no evidence that it is of any help in inflammatory conditions.

Allow me to quote the authors of a 1985 study into use of the product in patients suffering from rheumatoid arthritis (1).

"...Extracts of green lipped mussel does not produce any subjective or objective improvement in patients with rheumatoid arthritis when given over adequate periods of time. It is an expensive preparation sold over the counter to patients desperate for improvement. No evidence has been found for it to be marketed as a useful drug."

John Croft's responses to my article (*C&D* October 26) simply serves to confirm the hypothesis which I have proposed for the marketing of these products.

Terry Maguire
Belfast

(1) Larkin JG, Capell HA, Sturrock, RD. Ann. Rheum. Dis. (1985) Vol 44 p199

AAH targeted by MMC



Bill Revell: surprised

AAH have been referred to the Monopolies and Mergers Commission following their acquisition of assets from the defunct Medicopharma UK. Moreover, the MMC has put restrictions on AAH to prevent them buying further former Medicopharma UK assets or courting their former customers.

AAH have also to keep the assets they have bought separate until the MMC has reported. The report is due on February 20.

"I was certainly surprised by the MMC's decision," AAH group managing director Bill Revell told *C&D*. "I don't feel the transaction comes under the Fair Trading Act — it applies in cases of merger; we have just bought some assets."

Mr Revell argues that the

market share formerly taken by Medicopharma UK will go to other wholesalers broadly proportional to their existing shares of the market.

He says that the market is currently very fluid. "Macarthy were with us for a few days and then moved their business to Unichem; Greens, recently bought by Lloyds, was a Medicopharma customer and is now presumably being serviced by Lloyds themselves; and the Leicester Co-op recently bought by NCCLE was another former Medicopharma customer."

He believes it will be the end of December before there is a clear reading of the position.

Mr Revell says the restriction on soliciting former customers was still

under negotiation with the OFT. "The OFT don't want to prevent us doing anything we would do in the ordinary servicing of our customers. You have to be interested in servicing new customers if you want to do business."

He says the reference was made on the basis that there may have been a *de facto* merger. However, "We are confident that the outcome will be there is no case to answer."

Unichem's chief executive Peter Dodd expressed sympathy with Mr Revell's position. "I think AAH have been harshly treated," he told *C&D*.

"I was surprised at the referral; my own view is that the MMC will recognise this was not more than a distress sale."

"The order restricting AAH's activities is meaningless. It puts AAH in the uncomfortable situation that they can't go after other Medicopharma UK customers while we and the other wholesalers can."

"I recognise that the MMC probably do see this as a form of horizontal integration, but when Medicopharma NV took the decision to close down what else could they have done with these assets?"

Despite his sympathy for AAH, Mr Dodd roundly condemned Medicopharma UK. "They have reaped the whirlwind of their own folly. They have been over-competitive and they had too many depots covering too little business."

Suppliers respond to Autoscript users distress

Fears that users of the Autoscript pharmacy computer system supplied by the now defunct Medicopharma UK could be left high and dry seemed to be fading as *C&D* went to press. However, no-one was accepting responsibility for the system.

The Autoscript system predates PSL's Mediphase, and pharmacists have been expressing concern that they have not been able to get the necessary maintenance and update disks the system requires.

Raj Shah of the Galen pharmacy was worried enough to call a meeting of fellow Autoscript users in the Luton area.

"Autoscript needs monthly updates for the price list PIP codes and for labelling, plus regular maintenance. However our last update was in September.

"You can update the system manually to a certain extent and I have started to do this, but now a lot of pack changes and deletions are coming through."

Manual updating will allow the computer to be used for ordering, but the pharmacist won't have a record of the correct price and new pack sizes and drugs won't be in the system.

Mr Shah's meeting decided to approach AAH to see what they are doing.

He says there are two possible options: companies offering new systems with a "decent" exchange deal, or a computer software

company providing the service directly to Autoscript users. Mr Shah greatly prefers the second alternative.

C&D talked to David Porter and Maurice Leaman, directors of PSL, the independent company which introduced Mediphase.

"We are concerned for Autoscript users and are helping out where we can," said Mr Leaman. "We do have the facility to transfer PMRs to Mediphase."

"We don't mind assuming the responsibility of helping people out on a day-to-day basis with the problems of Autoscript. We feel they should not be left in the lurch; they are free to phone us with any problems they have."

Mr Porter, a former customer systems manager at Medicopharma UK, added: "AAH inherited the Autoscript system computers, these were used by Medicopharma to produce a disk which was a duplicate of Medicopharma's main product file. This was dispatched to the computer software house which wrote the original autoscript software, Specific Systems, who compressed it and put it into Autoscript form."

"The problem now is whether AAH is prepared to provide the disk."

C&D price list and PIP code information was used to update Medicopharma's master file. "We would like to do what we can to help Autoscript users; from a personal

point of view these are all people I know," said Mr Porter.

However it depends on AAH releasing updated master file disks, he said.

John Wood, managing director of Specific Systems, also responded positively to *C&D*'s inquiries.

"We had no direct contact with the pharmacist — we provided a service through Medicopharma UK only," he told *C&D*.

However, Specific Systems are producing facilities for pharmacists using the Autoscript system to change over to other wholesalers.

"We are in a position to provide people with a one-off product file to convert them to Unichem products, for example," he said.

"If any pharmacist who has the system and contacts Specific Systems, we will do our best to provide them with a product file for operation with the wholesaler of their choice."

AAH group managing director Bill Revell took a similar tack. "Nobody has raised it with me as a problem," he told *C&D*.

"There must be a far larger number of customers who were using branches which haven't reopened at all."

However, "our computer people are hoping to be able to offer an alternative software package, in a short period of time. It should fit the bill."

PSL; tel: 0402 381345. Specific Systems Ltd; tel: 0558 5525.

Lucozade factory fire

A fire broke out in the early hours of Tuesday morning at Smithkline Beecham's Bolton factory, which manufactures Lucozade. A spokesman from the company reported there had been damage to stock and building but said it was too early to say how much the damage was worth. Two production lines were operating again on Wednesday morning and the rest would be back on "as soon as possible". The cause of the fire is being investigated by police.

Green labels

Esselte Meto are producing pricing labels from recycled, unbleached paper and offer pre-printing of retailers names with solvent- and chlorine-free printing inks. Tel: 0753 810535.

Numark sign up with Sangers (NI)

Sangers (Northern Ireland) have applied for Numark membership. The move follows the withdrawal of Haydock and its parent company AAH from the voluntary trading organisation (C&D last week).

This is the third major regional wholesaler to join Numark since former Numark wholesale principal Medicopharma UK ceased trading.

There are around 275 Numark retail members in Northern Ireland.

Numark's managing director Terry Norris told C&D: "We are delighted. Three weeks down the road we are very pleased indeed to have three very good independent full-liners join us. Northern Ireland is a very important area of the UK for Numark."

Sangers managing director Arthur Shaw looks on Sangers becoming a Numark principal as an opportunity to expand Numark retail membership in Northern Ireland. "We are particularly glad to be joining at the time Numark has returned to its original role as an association of independent regional full-line pharmaceutical wholesalers," he said.

Sangers are planning to offer the full range of Numark own brand products and the Profitline promotional programme at the earliest date, "possibly from January." Haydock have agreed to provide a Numark service in the interim.

Mr Norris said Numark are "genuinely in discussion with other parties" with a view to extending Numark national coverage further still.

Unichem reap 450 new accounts

Unichem have reaped over 450 new accounts as a result of the collapse of Medicopharma and the company is ready to seize the opportunities of the single market, a regional delegate meeting was told last week.

Deputy chief executive Jeff Harris gave details of the 38 pharmacies the company has so far acquired as part of its franchise programme. The first two franchisees took formal possession last Thursday (see picture).

Unichem now delivers over 200 million items a year and the company's delivery fleet covers over 17 million miles a year, operations director Kelvin Hide said.

● Unichem are promoting a special shopfitting offer from store designers Planova. Planova will prepare a customised plan free of charge. After assessment of a pharmacist's requirements, a package will be formulated to an agreed budget and offered for consideration.



Dorothy Findley from Strathaven in Lanarkshire and John Rossi from Glasgow — Unichem's first franchisees — formally received the keys to their pharmacies at Unichem House last week. Marketing director Bill Hart and deputy chief executive Jeff Harris watch as the papers are signed. Dorothy Findley formerly worked as an area manager for Savory & Moore, and has taken over the William Blake Pharmacy in Strathaven. John Rossi will be running Tollcross Pharmacy in Glasgow

LIG profits hold up

The London International Group posted solid interim results showing a 16.5 per cent increase in pre-tax profits, which have risen from £17.6 million to £20.5m in the six months to September 30.

The health and personal products division achieved a 22.5 per cent increase in pre-tax profits, rising from £11.1m to 13.6m on a turnover up 7.2 per cent to £119.1m.

Sales up 2.3pc to £190m
Pre-tax profit up 16.5pc to £20.5m
EPS up 4.2pc to 8.27p
Interim dividend up 6.7pc to 3.2p

This has been partly due to the worldwide expansion of the condoms division; however, the Biogel surgeon's glove business has also improved over the period and manufacture of the product has been transferred to a new facility in Malaysia.

Colourcare, LIG's photo-processing division, has been hard hit by the current trading recession. Operating profits have dipped from £12.4m for the comparable period

last year to £11.5m this, and turnover has improved only marginally, from £70.8m, excluding discontinued activities, to £70.9m.

Colourcare have been heavily affected in the UK, but the company says it has been concentrating on operating efficiencies and strategic acquisitions.

Alan Woltz, LIG's chairman commented: "We are pleased with these results, but continue to operate on the assumption that economic conditions in the UK will not improve significantly until next year."

An interim dividend of 3.2p has been announced.

Store fitters restructure

The Nottingham-based Timber Tailors storefitting group — which includes Zaf and Planova — is being restructured in the wake of winning several multi-million pound contracts with prominent retail organisations throughout the country.

Rationalisation and new operating systems are designed to enable Zaf to concentrate on expansion of their modular storefitting system for multiple retailers throughout the UK and Europe.

Planova, the group's other modular storefitting company, and Systemic, which makes showcases and counters, have already relocated to larger premises in Nottingham.

New waste charges

New charges for the collection of waste from mixed (composite) hereditaments (properties which combine business and residential functions) will come into operation on April 1 next year.

Tony Baldry, the Junior Environment Minister, told the Commons last week that the Government intended to implement the provisions of the Environmental Protection Act 1990 and that this would require the revision of the Collection and Disposal of Waste Regulations 1988.

A circular will provide guidance on charging for the collection of the waste. The Department of the Environment will be consulting the Local Authority Associations and others over a draft of the Regulations and circular.

Chain stores Sunday plans

Tesco, Asda and Safeway have announced they plan to open on the first four Sundays in December, flouting the Sunday trading laws. If they go ahead up to 1,000 supermarkets will be trading seven days a week in the run-up to Christmas. All three chains have in-store pharmacies. The move has been condemned in the Commons in a parliamentary motion tabled by David Alton (Lib Dem).

Coming Events

Monday, December 2

Southampton Branch, RPSGB. The Crown Hotel, Lyndhurst, 7.30 for 8pm. Branch sesquicentennial dinner with guest speaker Sir Donald Acheson.

Tuesday, December 3

Hull Pharmacist's Association. Darley's Hotel, Boothferry Road, Hessle, 7.30 for 8pm. Christmas evening.

Oxfordshire Branch and Reading Branch, RPSGB. Joint social evening, skittles at the Red Lion pub, Theale, Reading, 7.30 for 8pm. Supper, £5.

Leicestershire Branch, RPSGB. Postgraduate Medical Centre, Leicester Royal Infirmary, 7.30 for 8pm. Health education session on blood pressure testing with Lindsay Taylor, Boots teacher/practitioner and Gerald Prince, lecturer, Polytechnic School of Pharmacy.

Barnet Branch, RPSGB. Postgraduate Medical Centre, 7.30 for 8pm. "Some like it hot — the chemistry of curry," speaker Dr R Stevens.

Stirling Branch, RPSGB. Royal Scottish National Hospital (West), conference room two. Topics for discussion will be the revised Code of Ethics, monoclonal antibodies and public relations.

East Metropolitan Branch, RPSGB. Churchill Room, Wanstead Library, London E11, 7.30 for 8pm. Discussion of resolutions for Branch Representatives Meeting followed by a social gathering.

Wednesday, December 4

Joint meeting of Doncaster and

Sheffield Branches, RPSGB.

Rotherham District General Hospital, Sheffield, 7.30 for 8pm. "The Channel Tunnel" by Mr Bennett, a civil engineer on the project.

Scottish Department, RPSGB. The Piersland House Hotel, Troon at 8pm. "Cochlear implants," by Mr R.S. Singh, consultant ENT surgeon, Crosshouse Hospital.

Somerset Branch, RPSGB. Red Tile Inn, Cossington, 7.30 for 8pm. Annual skittle match and discussions of motions for branch representatives meeting.

Thursday, December 5

Bristol Branch, RPSGB; joint meeting with dentists. Postgraduate Centre, Frenchay Hospital, 7 for 8pm. "Dental remedies — an historical account," by Dr W.E. Court.

Northern Scottish Branch, RPSGB. Craigmonie Hotel, Inverness, 8pm. Wine tasting evening, with guest speaker Brian Devlin, AIDS co-ordinator, Highland Health Board.

Friday, December 6

Slough Branch, RPSGB. The Postgraduate Medical Centre, King Edward VII Hospital, Windsor, 7.15 for 8pm. "Weather forecasting and climatic change," by Colin Flood, divisional director, meteorological office.

Saturday, December 7

Scottish Department, RPSGB. Western House, Ayr, 7.30 for 8pm. Celdh. Tickets £15.

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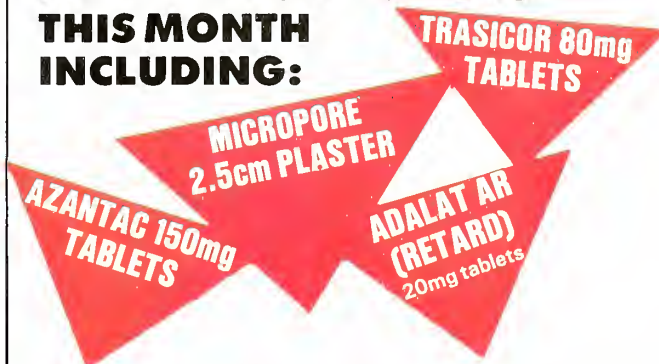
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NOVEMBER 1991

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41.00	Lou Lou 100ml EDP	26.00	18.90
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27.50	Jai Ose 50ml EDT Spray	9.95	7.95
8.95	Jai Ose Deodorant Spray	2.50	1.75
	Pagan 15ml Spray in Pouch	2.50	1.75
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17.95	Anais Anais 30ml EDT Spray Drum Pk	8.50	7.95
15.30	Aromatics 10ml EDT Spray	10.60	9.95
19.95	Cachet 90ml Cologne Spray	6.50	4.95
24.50	Chanel 5 50ml EDT	18.25	17.25
30.00	Gorgio 60ml EDT Spray	19.95	16.50
28.50	Miss Dior 50ml EDT Spray	16.50	13.50
8.50	Ma Griffe 30ml PDT Spray	3.75	2.95
9.95	Ma Griffe Touch Tip Perfume	4.95	1.95
9.15	Vanderbilt 15ml EDT Spray	4.85	3.95
13.80	Vanderbilt 30ml EDT Spray	7.50	6.75
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7.95	Joi De Vivre 100ml Cologne Spray	3.55
2.99	Joi De Vivre 100g Talc	1.00
7.95	Mystique 100ml Cologne Spray	3.55
7.95	Style 100ml Cologne Spray	3.55
8.95	Anteus 43g Talc	2.50
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About people

A devilish idea!

The Devil's Sweetshop proved a fun way to help children — and adults — distinguish between sweets and drugs as part of the Welsh DUMP campaign earlier this month.

The sweetshop, originally a dolls house, is filled with sweet-like drugs or drug-like sweets in different windows. The child presses a button after deciding if the window contains a sweet or a drug, then a computerised voice gives the correct answer, and advises medicines to be kept in a safe place.

The sweetshop was taken to various localities in South Glamorgan during the campaign, including play schools, supermarkets and shopping precincts.

Dr Brian Evans, chief administrative pharmaceutical officer for South Glamorgan Health Authority, says it will continue to be used as an educational tool now the official campaign is over.

Some 1.2 tonnes of unwanted

medicines and poisons have been collected in Wales since the last DUMP campaign two years ago, when 2.4 tonnes was collected. The quantity collected during this campaign has not yet been assessed, but includes strychnine, cyanide, arsenic, mercury and dioxane, not to mention a bottle of extremely flammable sodium sticks in oil!

Clark's help out 'Children in Need'

Pharmacy assistant Karen Buss and trainee dispenser Rachel Ede organised a raffle and cake stall for two weeks at Clark's Chemist in Cranbrook, Kent and raised £526 for Children in Need.

Pharmacist Eric Dubois described their effort as "absolutely fantastic, particularly as it was entirely off their own bat". He said that customers were terrific and appreciated what was being done, which was reflected in the amount they contributed.

APPOINTMENTS

Robinson Healthcare have appointed **David Booth** as their new marketing manager for medical products. His responsibilities will be to reorganise and rejuvenate the range in addition to supervising product launches.

Thomson Medical Co have appointed **Susie Lonie** as new products development manager. Ms Lonie previously worked for Proctor & Gamble and Cussons.

Muelhens Ltd, subsidiary of Muelhens KG, have appointed **David Till** as a director. He assumes responsibility for finance, administration and distribution.

Peter Bradley joins Gerard House as technical development manager on a part-time basis.

Revlon have reorganised their European business into two regions. **Malcolm Kemp**, president of Revlon Northern Europe, will now be responsible for the UK, Eire, South Africa, Benelux, Israel, export, distributor and duty free markets. **Giorgio Laurenti**, president of Revlon Central and Eastern Europe, will be responsible for Germany, Austria, Switzerland, France, Italy and Eastern Europe.



Courtesy South Wales Echo

Left: Chief administrative pharmaceutical officer for South Glamorgan, Dr Brian Evans and Councillor Jean Wilkinson, environmental services, are shown with two youngsters at the Devil's Sweetshop.

Dressing up with a difference!

Customers at Sigma Chemist in Wellingborough were treated to some eastern flavour earlier this month when staff dressed up in traditional costume to celebrate the Hindu festival of Diwali.

A selection of traditional sweets was served to customers, with some people lured back for more, says proprietor pharmacist Manu Patel. The pharmacy's customers include people from a mixture of different cultures, all of whom enjoyed the event and were pleased to see the pharmacy participating, he added. Staff also enjoyed the day.

Although Mr Patel was tempted to dress up in costume himself, he decided to stick to his suit "to maintain a professional image".



Courtesy Northants Evening Telegraph

Diwali at Sigma Chemist, when staff celebrated the Hindu festival in style. Mary Perkins (left) and Janie Flint serve traditional sweets to customers, while pharmacist Manu Patel looks on.

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